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COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Good W	ork Advertising, Inc.		
SUBJECT	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate o Status
		ADDITIONAL CO	PY REQUIRED
FROM:		e (Printed or typed)	
645	6 SW 10th Ter.	Address	
We	st Miami, FL		
	City	, State & Zip	
786	-316-9166		
	Daytime 1	Telephone number	
chris	stian.cipriani@gmail.com		
	E-mail address: (to be use	ed for future annual report i	notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ame of the corpor			
CLE II PRIN	<u>CIPAL OFFICE</u> Principal <u>street</u> address	,	Mailing address, if different is:
SW 10th Ter.	1 (meipai <u>server</u> address		The decision is different to
Miami, FL 331	44		
CLE III PURP urpose for which	the corporation is organized is:	and marketing s	ervices
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· 			
CLE IV SHAL	<u>RES</u> 1		
CLE IV SHAP imber of shares o	RES 1 fstock is:		
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CLE V INITE Name and Tit Address Name and Title Address	AL OFFICERS AND/OR DIRECTORS Christian Cipriani, President & CEO 6456 SW 10th Ter West Miami, FL 33144	Name and Title: Address: Name and Title: Address: Name and Title:	

Name a	and Title:	Name and Title:	
Addre	ss	Address:	
			<u>.</u>
ARTICLE VI The name and	REGISTERED AGENT Florida street address (P.O. Box NOT accepts	able) of the registered agent is:	
Name:	Christian Cipriani	er inc region ou ing	
	6456 SW 10th Ter		
Address:			
	West Miami, FL 33144		
A DODLOT IN LUIS	N/COPPON AMON		
AKTICLE VII	<u>INCORPORATOR</u>		
The <u>name and</u>	address of the Incorporator is:		
Name:	Christian Cipriani		
Address:	6456 SW 10th Ter.		
	West Miami, FL 33144		
Effective date,	<u>I EFFECTIVE DATE:</u> if other than the date of filing: date is listed, the date must be specific and filing.)	, (OPTION	
	te inserted in this block does not meet the apple effective date on the Department of State's re-		nents, this date will not be listed as
	amed as registered agent to accept service of p I am familiar with and accept the appointmen		
10	<u> </u>		3-21-16
	Required Signature/Registered Age	nt	Date
I submit this do document to the	ocument and affirm that the facts stated here e Department of State constitutes a third degre	in are true. I am aware that t e felony as provided for in s.8.1	he false information submitted in a 7.155, F.S.
Lift	2 · ·		3-21-16
Rea	uired Signature/Incorporator		Date

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