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COVER LETTER

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

SUBJECT:	& B Professional Services, Inc.		
50B0E011	(PROPOSED CORPORA	TE NAME – MUST INCL	UDE SUFFIX)
Enclosed are an o	original and one (1) copy of the arti	cles of incorporation and	l a check for:
■ \$70.00 Filing Fe		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	DPY REQUIRED
FROM:	Name	(Printed or typed)	
-	9574 Carousel Circle North	Address	
	Boca Raton FL 33434	Address	
-	City,	State & Zip	
	(813) 299-3144		
-	Daytime T	elephone number	
	clainep.araujo@gmail.com		
-	E-mail address: (to be used	for future annual report	notification)

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

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

ARTICLE I NA The name of the cor	IME M & B Professiona poration shall be:	l Services, Inc.	
ARTICLE II PR	RINCIPAL OFFICE Principal street address	N	failing address, if different is:
9574 Carousel Ci	rele North		
Boca Raton FL	33434		
ARTICLE III PU The purpose for wh	A A A A A A A A A A A A A A A A A A A	ny and all lawful business	
			<u> </u>
			<u> </u>
			77 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
	es of stock is:		
	Alvaro Criales (PRES)		Elaine Araujo (VP)
Name and Address	9574 Carousel Circle North	Name and Title: Address:	9574 Carousel Circle North
Addiess	Boca Raton FL 33434	Address.	Boca Raton FL 33434
		Name and Title:	
Address			
Name and	Title:	Name and Title:	
Address		Address: _	
			

Name an	d Title:	Name and Title:	
Address		Address:	
			
	<u>REGISTERED AGENT</u> <u>lorida street address</u> (P.O. Box NOT accept	able) of the registered execution	
Name:	Alvaro Criales	iote) of the registered agent is.	
Address:	9574 Carousel Circle North		
riddiogs.	Boca Raton FL 33434		
		AGE :	n. • 3
ARTICLE VII	<u>INCORPORATOR</u>		5 5
The name and ac	ddress of the Incorporator is:	32 X X X X X X X X X X X X X X X X X X X	, , ,
Name:	Alvaro Criales		
Address:	9574 Carousel Circle North	Phi to the less	
	Boca Raton FL 33434		•
Effective date, if		ラ <u> えられ。</u> . (OPTIONAL) cannot be more than five business days prior or 90 bus	siness
	inserted in this block does not meet the app ffective date on the Department of State's re	licable statutory filing requirements, this date will not be licords.	isted as
Having been nan this certificate, I	ned as registered agent to accept service of a	process for the above stated corporation at the place desig t as registered agent and agree to act in this capacity	nated in
		04/05/16	
	Required Signature/Registered Age	nt Date	
I submit this doc document to the	cument and affirm that the facts stated here Department of Spate constitutes a third degre	in are true. I am aware that the false information submi ee felony as provided for in s.817.155, F.S.	itted in a
1.		allactic	
Requi	ired Signature/Incorporator		