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Division of Corporations

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From:

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Account Number: 075350000353 Phone

: (800)221-2972

Fax Number

: (888)692-9256

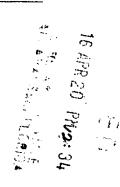
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## FLORIDA PROFIT/NON PROFIT CORPORATION R & R GEMSITES CORP.

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APR 2 / 2016

S. GILBERT

From:

04/20/2016 14:03 #152 P.002/003

	10 848 ou	Dist
ARTICLES OF INCORPORATION	10 BLK 50	711/2:36
polished with Chapter 607 and/or Chapter 621 F.S. (Profit)		<b>7</b> . U . 1

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)  ARTICLE I NAME  The name of the corporation shall be:  R & R GEMSITES CORP.			
ARTICLE I NAN The name of the corpo	ME R & R GEMSITES COP	RP.	1961年1945年,PEO東於
ARTICLE II PRI			Mailing address, if different is:
6633 Costa Circle		6633 C	osta Circle
Naples, FL 34113		Naples	, FL 34113
	POSE  h the corporation is organized is: ities set forth and permitted under and Fi		
		·	······································
The number of shares of shares of the shares	of stock is:	<u>s</u>	Michael Ciliano, Director
The number of shares of shares of shares of shares of share and Ti	of stock is:  CAL OFFICERS AND/OR DIRECTOR.  tle:  6633 Costa Circle	S Name and Titl	e: Michael Ciliano, Director 6633 Costa Circle
ARTICLE V INIT	of stock is:  CAL OFFICERS AND/OR DIRECTOR.  tle:  6633 Costa Circle	<u>s</u>	e:
The number of shares of ARTICLE V INIT  Name and Ti  Address	of stock is:  IAL OFFICERS AND/OR DIRECTOR.  tle:  Josephine Ciliano, Director  6633 Costa Circle	S Name and Titl Address:	6633 Costa Circle Naples, FL 34113

Name	and Title:	Name and Title:
Addre	ess	Address:
	the second supplies to the second	en la companya de la
	REGISTERED AGENT	
The name and	Florida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	Josephine Ciliano	
Address:	6633 Costa Circle	
	Naples, FL 34113	
	INCORPORATOR	
he <u>name and a</u>	address of the Incorporator is:	
Name:	Josephine Ciliano	
Address:	6633 Costa Circle	
	Naples, FL 34113	
ffective date, if		(OPTIONAL) be more than five business days prior or 90 business
	e inserted in this block does not meet the applicable st effective date on the Department of State's records.	tatutory filing requirements, this date will not be listed as
	med as registered agent to accept service of process f am familiar with and accept the appointment as regis	or the above stated corporation at the place designated in tered agent and agree to act in this capacity
	Bughne Cilionio Required Signature Registered Agent	1/20/16
7	Required Signature/Registered Agent	Dete
	cument and affirm that the facts stated herein are tr Department of State constitutes a third degree felony	- ,
	One plane Ciliane	4/20/14
Requi	red Signature/Incorporator	Daic.