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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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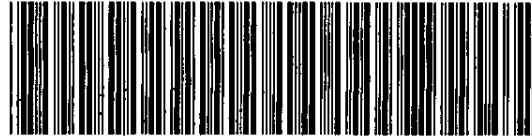
(Business Entity Name)

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TALLAHASSEE, FLORIDA

7/6
5-17-16

COVER LETTER

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

SUBJECT: United States Corporate Management Inc

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and 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 of
Status

ADDITIONAL COPY REQUIRED

FROM: Raffaele Abbate

Name (Printed or typed)

9737 NW 41st Street, Suite 792

Address

Doral, Florida 33178

City, State & Zip

203-554-4397

Daytime Telephone number

c_ceballos@oxora.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 NAME

The name of the corporation shall be: United States Corporate Management Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address
9737 NW 41st Street, Suite 792

Doral, Florida 33178

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Provides corporate management services , day to day administration,
marketing, business development, consultancy for existing companies, the stablishment of new ones, guidance to
entreprenuers and CEO's, in an international setting.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Raffaele Abbate/President

Address 9737 NW 41st Street, Suite 792

Doral, Florida 33178

Name and Title: _____

Address: _____

Name and Title: Giuditta T. Abbate/Vice President

Address 9737 NW 41st Street, Suite 792

Doral, Florida 33178

Name and Title: _____

Address: _____

Name and Title: Carolina Ceballos/Secretary

Address 9737 NW 41st Street, Suite 792

Doral, Florida 33178

Name and Title: _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 MAR -9 PM 6:32

7-11-98

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Raffaele Abbate
Address: 9737 NW 41st Street, Suite 792
Doral, Florida 33178

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Raffaele Abbate
Address: 9737 NW 41st Street, Suite 792
Doral, Florida 33178

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: June 1, 2016 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

RAFFAELE ABBATE 5/8/2016
Required Signature/Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

RAFFAELE ABBATE 5/8/2016
Required Signature/Incorporator Date