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FLORIDA PROFIT/NON PROFIT CORPORATION PAINGNWE CORP

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

name of the corpo	PAINGNWE CORP		<u> </u>	-
TICLE II PRII	NCIPAL OFFICE			
6 SW 124 TERR	Principal <u>street</u> address ACE		Mailing address, if different is:	;
RAMAR, FL 330				
	:			
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TICLE III PUR.	POSE h the corporation is organized is:	and All Lawful Business		-4
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TICLEIV SHA	IRES of stock is:			
TICLE V JNJI	<u>tial opficers and/or directoi</u> tie:_nwe n k0 (president)	RS Name and Titl	e: MAUNG H PAING (Vicepresic	dent)
	IAL OPFICERS AND/OR DIRECTOR	RS Name and Titl Address:	e: MAUNG H PAING (Vicepresic 4236 SW 124 TERRACE	dent)
TICLE V INT	<u>tial opficers and/or directoi</u> tie:_nwe n k0 (president)	Name and Titl		dent)
Name and T	ITAL OPFICERS AND/OR DIRECTOR NWE N KO (PRESIDENT) 4236 SW 124 TERRACE MIRAMAR, PL 33027	Name and Titl Address:	4236 SW 124 TERRACE MIRAMAR, FL 33027	
Name and Ti	ITAL OPFICERS AND/OR DIRECTOR NWE N KO (PRESIDENT) 4236 SW 124 TERRACE MIRAMAR, PL 33027	Name and Titl Address: Name and Titl	4236 SW 124 TERRACE MIRAMAR, FL 33027	
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Nemu e	nd (Title:	Name and Title:	
Addres		Address:	
	REGISTERED AGENT Florida street address (P.O. Box NOT accep LUIS F ROSALES	otable) of the registered agent is:	
Name:	5931 NW 173 DR STE 9A		
Address:	MIAMI, FL 33015		
ARTICLE VI <u>J</u>	INCORPORATOR		Sent t
The <u>name and a</u>	address of the Incorporator is:	. · · · · · · · · · · · · · · · · · · ·	
Name:	LUIS F ROSALES		
Address:	5931 NW 173 DR STE 9A		د ــــــــــــــــــــــــــــــــــــ
	М1AM1, FL 33015		
Effective duta, i		d cannot be more than five dusiness days prior or 90 dusiness	.3
Note: (I'the day	te inserted in this block does not meet the appellective date on the Department of State's r	plicable statutory filing requirements, this date will not be listed as records.	
Huving been no this certificute, .	amed as registered agent to accept service of I um familiar with und uccept the appainme	f process for the above stated corporation at the place designated in ent as registered agent and agree to act in this capacity	
		07/25/2016	
	Required Signature/Registered Ag	gent Date	
I submit this di document to the	ocument and affirm that the facts stated her e Department of State constitutes a third degi	rein are true. I am aware that the false information submitted in a tree felony as provided for in s.817.155, F.S.	
di Tink		07/25/2016	
Reo	uired Sinnature/incorporator	Date	