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COVER LETTER

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

SUBJECT:	talis G	roup Corp.			
		(PROPOSED CORPORA	TE NAME – MUST INCL	UDE SUFFIX)	
Enclosed are an	origi	nal and one (1) copy of the art	icles of incorporation and	d a check for:	
■ \$70. Filing F		□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate o	
			ADDITIONAL CO	PPY REQUIRED	
FROM	Pedi	ro Jimenez Name	e (Printed or typed)		
	1325	4 SW 146th St.			
	Address				
	Miar	ni, FL 33186			
	City, State & Zip				
	(305) 450-9255			
		Daytime 7	elephone number		
	Peter	J707@Hotmail.com			
	_	E-mail address: (to be use	d for future annual report i	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)

Principal street address Mailing address, if different is: 8600 NW South River Drive - Suite #102 Miami, FL 33166 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Insurance ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Address Name and Title: Address Name and Title: Pedro Jimenez / Director Name and Title: Address Address Name and Title: Address Address Address Name and Title: Address Address Address Address Address:	ARTICLE II	PRINCIPAL OFFICE		
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Maria Jose Jimenez / Director Address 13254 SW 146th St. Name and Title: Address: Name and Title: Address: Name and Title: Address: Address: Address: Address: Address:			Mailing address, if	different is:
The purpose for which the corporation is organized is: Insurance	8600 NW South	River Drive - Suite #102		
The purpose for which the corporation is organized is: International Content of State of S	Miami, FL 3316	66	4	
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Maria Jose Jimenez / Director Address 13254 SW 146th St. Name and Title: Pedro Jimenez / Director Name and Title: Address Name and Title: Address Address: Address:	ARTICLE III The purpose for	PURPOSE Insuran	ce	
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Maria Jose Jimenez / Director Address 13254 SW 146th St. Name and Title: Address: Name and Title: Address: Name and Title: Address: Address: Address: Address: Address:				.
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Address Name and Title: Address Name and Title: Pedro Jimenez / Director Name and Title: Address Name and Title: Address Name and Title: Address: Address:				<u></u>
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Address Name and Title: Address Name and Title: Pedro Jimenez / Director Name and Title: Name and Title: Address: Name and Title: Address: Address: Address: Address:				L. I.
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Address Name and Title: Address Name and Title: Pedro Jimenez / Director Name and Title: Address Name and Title: Address Address: Address:				ப்பட்ட
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Maria Jose Jimenez / Director Name and Title: Address Name and Title: Miami, FL 33186 Name and Title: Pedro Jimenez / Director Name and Title: Address Name and Title: Address Address: Address:	_			unid Trans
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Maria Josc Jimenez / Director Name and Title: Address Name and Title: Maria Josc Jimenez / Director Name and Title: Address: Name and Title: Address Name and Title: Address Name and Title: Address Address:				
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Maria Jose Jimenez / Director Name and Title: Address Miami, FL 33186 Name and Title: Pedro Jimenez / Director Name and Title: Address Address: Address: Address:				
Address 13254 SW 146th St. Address:		Maria lose limenez / Director		
Name and Title: Pedro Jimenez / Director Name and Title: Address Name and Title: Address:		13254 SW 146th St		
Name and Title: Name and Title: Address Address: Name and Title: Address:		Miami, FL 33186		
Name and Title: Name and Title: Address Name and Title: Address:				
Address Address:	Name ar	nd Title:	Name and Title:	
Miami FL 33186	Address	13254 SW 146th St.	Address:	
	<u>Mi</u>	Miami, FL 33186		
Name and Title: Name and Title:	Name an	nd Title:	Name and Title:	· · · · · · · · · · · · · · · · · · ·
Address Address:	Address	s	Address:	

Name a	nd Title:	Name and Title:	
Addres	es	Address:	
			
	REGISTERED AGENT		
The <u>name and I</u>	Florida street address (P.O. Box NOT acceptab	e) of the registered agent is:	
Name:	Pedro Jimenez		
Address:	13254 SW 146th St.	<u></u>	
	Miami, FL 33186		
ARTICLE VII	<u>INCORPORATOR</u>		
The name and a	address of the Incorporator is:		
Name:	Pedro Jimenez		
Address:	13254 SW 146th St.		
	Miami, FL 33186	- 	
Effective date, if (If an effective days after the f	iling.) te inserted in this block does not meet the applic		
Having been na	effective date on the Department of State's reco med as registered agent to accept service of pro- l am familiar with and accept the appointment of	ocess for the above stated corporation at the place design s registered agent and agree to act in this capacity	nuted in
	Eldro fimene ? .	August 01 - 2016	
	Required Signature/Registered Agent	Date	
I submit this do document to the	ocument and affirm that the facts stated herein Department of State constitutes a third degree	are true. I am aware that the false information submit felony as provided for in s.817.155, F.S.	tted in a
	(Kedn Limines	August 01 - 2016	
Requ	uired Signature/Incorporator	Date	