

P/600007/554

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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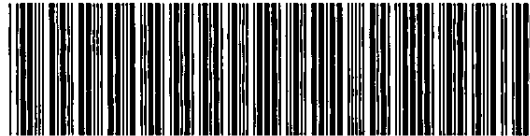
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
16 AUG 25 AM 10:20

08/31/16

## COVER LETTER

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

**SUBJECT:** USGB ENTERPRISES, 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      ☒ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

FROM: USGB ENTERPRISES, INC  
\_\_\_\_\_  
Name (Printed or typed)  
  
1 E BROWARD BLVD, STE 604  
\_\_\_\_\_  
Address  
  
FT LAUDERDALE, FL 33301  
\_\_\_\_\_  
City, State & Zip  
  
(954) 900 - 3691  
\_\_\_\_\_  
Daytime Telephone number  
  
INFO@USGB  
\_\_\_\_\_  
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: USGB ENTERPRISES, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
1 E BROWARD BLVD STE 604

Mailing address, if different is:

FT LAUDERDALE, FL 33301

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: PRECIOUS METAL DEALERS

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**ARTICLE IV SHARES**

The number of shares of stock is: 200

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: ALEX FISHER

Name and Title: \_\_\_\_\_

Address 1 E BROWARD BLVD STE 604

Address: \_\_\_\_\_

FT LAUDERDALE, FL 33301

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

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: ALEX FISHER  
Address: 1 E BROWARD BLVD STE 604  
FT LAUDERDALE, FL 33301

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**ARTICLE VII INCORPORATOR**

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

Name: ALEX FISHER  
Address: 1 E BROWARD BLVD STE 604  
FT LAUDERDALE, FL 33301

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (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*

*Alex Fisher*

Required Signature/Registered Agent

08/15/2016

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.*

*Alex Fisher*

Required Signature/Incorporator

08/15/2016

Date