Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

Electronic Filing Cover Sheet

(((H160002168993)))



H160002168993ABC9

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

Account Number: 075350000353 : (800)221-2972 Phone

Fax Number : (888)692-9256

**Enter the email address for this business entity to be used for future , fannual report mailings. Enter only one email address please. **

Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION CHAPTER 3 CONCEPTS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

SEP 01 2015

T. SCOTT

Electronic Filing Menu

Corporate Filing Menu

Help

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

ARTICLE I NAME The name of the corp	ME CHAPTER 3 CONCEPT oration shall be:	s, inc.	
<u>ARTICLE II PRI</u>		Mailing address, if	different is:
MIAMI BEACH, FI	L 33140		
ARTICLE III PUI The purpose for whice	The section of the se		
			
			306
			ω
ARTICLE IV SHA The number of shares	<u>1RES</u> 200 of stock is:	·	
ARTICLE V INI	TIAL OFFICERS AND/OR DIRECTORS		νί (*)
Name and T	ROLANDO HENAO - DIR	Name and Title:	
Address	2625 COLLINS AVE., UNIT #1506	Address:	
	MIAMI BEACH, FL 33140		
	· · · · · · · · · · · · · · · · · · ·		
Name and Ti	tle:	Name and Title:	
Address		Address:	
Name and Ti	ile:	Name and Title:	
Address		Address:	

Name ar	nd Title:	Name and Title:	
Address	s ·	Address:	
•			
The name and F	REGISTERED AGENT Iorida street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	ROLANDO HENAO	,,	
Address:	2625 COLLINS AVE., UNIT #1506		
	MIAMI BEACH, FL 33140		
ARTICLE VII	INCORPORATOR		
The name and a	ddress of the Incorporator is:		
Name:	ROLANDO HENAO		
Address:	2625 COLLINS AVE., UNIT #1506		
	MIAMI BEACH, FL 33140		
ARTICLE VIII	EFFECTIVE DATE:		
Effective date, if	other than the date of filing:	, (OPTIONAL)	
(If an effective of days after the fi	date is listed, the date must be specific and ca ling.)	nnot be more than five business t	iays prior or 90 business
Note: If the date	inserted in this block does not meet the applica	hie etatutory filing requirements, th	nis date will not be listed a
the document's c	effective date on the Department of State's recor	ds.	in the state of the state of the
Having been nat	med as registered agent to accept service of pro am familiar with and accept the appointment as	cess for the above stated corporation registered agent and agree to act i	on at the place designated n this capacity
120	11		8-21-16
	Required Signature/Registered Agent	· · · · · · · · · · · · · · · · · · ·	Date
I submit this doc	cument and affirm that the facts stated herein Department of State constitutes a third degree fo	ure true. I am aware that the false clony as provided for in s.817,155, i	: information submitted in F.S.
\aocument to the			
accument to the	0 0 %		8-31-16