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(Red	questor's Name)	
(Add	dress)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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ALLAHASSE COSE

COVER LETTER

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

SUBJECT:

Total International, Inc.

954-540-8503

ablankle@hotmail.com

-	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	<u>JDE SUFFIX</u>)
Enclosed are an ori	iginal and one (1) copy of the ar	ticles of incorporation and	a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: A	rthur G Blankley	e (Printed or typed)	
27	00 N. Highway A1A 1-204		
		Address	
FROM: <u>^</u>	& Certificate of Status rthur G Blankley Nam 00 N. Highway A1A 1-204	& Certified Copy ADDITIONAL CO	Certifice & Certifice Status

NOTE: Please provide the original and one copy of the articles.

City, State & Zip

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

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

LE II PRIL	NCIPAL OFFICE					
orth Highway	Principal street address	Mailing address, if different is:				
		2700 North Highway A1A_1-204 Indialantic, FL 32903				
alantic, FL 32903		Indialantic, FL 32903				
CLE III PUR rpose for which	POSE the corporation is organized is:					
age in any lawf	ful act or activity for which a corporation	may be organized und	der the laws of Florida.			
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			A S	li ··	F	<u>***</u> www.printy.digracy.di www.
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mber of shares of the result o	of stock is: CIAL OFFICERS AND/OR DIRECTORS ttle: 2700 N. Highway A1A 1-204 Indialantic, FL 32903	Name and Title	e:Calle Pisac 253 Surco, Lima, Peru	io Alv	arado,	
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Name and Tit Address Address	of stock is: CIAL OFFICERS AND/OR DIRECTORS itle: 2700 N. Highway A1A 1-204 Indialantic, FL 32903	Name and Title Address: Name and Title Address: Address:	e:	io Alv	arado,	

Name a	and Title:	Name and Title:		-
Addre	ss	Address:		Tigas programs
				-
	REGISTERED AGENT			-
The <u>name and </u> Name:	Florida street address (P.O. Box NOT acceptable Arthur G Blankley	e) of the registered agent is	:	
Address:	2700 North Highway A1A 1-204			
rudicss.	Indialantic, FL 32903		28I	
<u>ARTICLE VII</u>	INCORPORATOR		ZBI6 NOY -2	
Γhė <u>name and</u> :	address of the Incorporator is:		237 TO 122	14.44
Name:	Arthur G Blankley	 _		
Address:	2700 North Highway A1A 1-204		9: 30 ORIGINAL	
	Indialantic, FL 32903	- 		
Effective date, in the last an effective days after the last after the last after days a	date is listed, the date must be specific and car	ble statutory filing require	usiness days prior or 90 business	5
	amed as registered agent to accept service of proc I am familiar with and accept the appointment as			in
ath	A Dec. Lum		10/31/2016	e contrator d
Arth	Required Signature/Registered Agent		Date	
submit this de	ocument and affirm that the facts stated herein a e Department of State constitutes a third degree fe	ire true. I am aware that lony as provided for in s.c	the false information submitted in 817.155, F.S.	a
ant	hu & Blankles		10/31/2016	
Req	uired Signature/Incorporator		Date	-
Art	hur 6 Blankley			

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