1/23/2017

Division of Corporations

## da Department of State

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.

(((H17000020485 3)))



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

To	כ	:
----	---	---

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name

: EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I2000000146

Phone

: (305)444-4994

Fax Number

: (305)444-4977

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

Email Address:				
	P	<b>≟</b> =	 	-

## FLORIDA PROFIT/NON PROFIT CORPORATION LIVILL CORP

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

~ ! 2 3 **2017** 

Srumbley

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

RTICLE II PRING				
	CIPAL OFFICE Principal street address		Mailing address, if different is:	
318 SW 1ST AVE				
NAMI, FL 33129				
RTICLE III PURP he purpose for which	OSE the corporation is organized is:  ANY ANI	D ALL LAWFUL B	USINESS	
			<u>د. د د د د د د د د د د د د د د د د د د </u>	
			7 J	
			JAN 2	
	<del>.</del>		<u> </u>	
	· · · · · · · · · · · · · · · · · · ·	·		
			7. SPATE	
	AL OFFICERS AND/OR DIRECTORS  Carlos Eduardo Linares Villegas (P)	Name and Title	Maria Eugenia Linares Villegas (D)	
Address	1818 SW IST AVE	Address:	1818 SW IST AVE	
	MIAMI, FL 33129		MIAMI, FL 33129	
Name and Title	Felicia Villegas De Linares (V/P)	Name and Title	:	
Address	1818 SW IST AVE	Address:		
Address	1818 SW 1ST AVE MIAMI, FL 33129	Address:		
	MIAMI, FL 33129	<del></del>		
Address  Name and Title  Address	Gerardo Linares Borreto (D)	<del></del>		

Name	and Title:	Name and Title:	
Addı	ess	Address:	
		<del></del>	
		<del>u_</del>	
	<u>REGISTERED AGENT</u> 1 Florida street address (P.O. Box NOT accepts	able) of the registered agent i	is:
Name:	Carlos Eduardo Linares Villegas		
Address:	1818 SW 1ST AVE	···	
	MIAMI, FL 33129		
ARTICLE VI	I INCORPORATOR		
The name and	laddress of the Incorporator is:		
Name:	Carlos Eduardo Linares Villegas		
Address:	1818 SW 1ST AVE		
	MIAMI, FL 33129	<del></del>	
Effective date, (If an effectiv	U EFFECTIVE DATE: , if other than the date of filing: e date is listed, the date must be specific and	. (OPTIC	
the document's	ste inserted in this block does not meet the appl s effective date on the Department of State's rec named as registered agent to accept service of p	cords.	
this certificate,	I am familiar with and accept the appointment	t as registered agent and agr	ree to act in this capacity
g $U$	auchoful		01/20/2017
	Required Signature/Registered Age:	nt	Date
I submit this a document to $\psi$	locured of and affirm that the facts stated here he Department of State constitutes a third degre	in are true. I am aware tha e felony as provided for in s	t the false information submitted in 817.155, F.S.
~ //a	eighty >		01/20/2017
Red	quited Signature/Incorporator		Date