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Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
OKAPI GROUP USA, INC

Certificate of Status	0
Certified Copy	1
Page Count	03
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TALLAHASSEE, FLORIDA

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JAN 24 2017

K. Brumbley

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: OKAPI GROUP USA, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address
8300 NW 53 STREET SUITE 350-015
MIAMI, FL 33166

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: TO TRANSACT ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES
The number of shares of stock is: 200 SHARES PAR VALUE $1.00 @

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ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CARLOS COLL PD.
Address: 245 NE 14th STREET APT 2007
MIAMI, FL 33132

Name and Title:
Address:

Name and Title: MARIELA SALTOS. VP.
Address: 2641 N FLAMINGO RD. UNIT 2008N
SUNRISE FL , 33323

Name and Title:
Address:

Name and Title:
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: CARLOS COLL

Address: 245 NE 14th STREET APT 2007

MIAMI, FL 33132

ARTICLE VII INCORPORATOR

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

Name: CARLOS COLL

Address: 245 NE 14th STREET APT 2007

MIAMI, FL 33132

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 days prior or 90 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

_____ 01/22/2016

Required Signature/Registered Agent 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.

_____ 01/22/2016

Required Signature/Incorporator Date