

P17000010034

Florida Department of State
Division of Corporations
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H17000028333ABC.

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To:

Division of Corporations
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FLORIDA PROFIT/NON PROFIT CORPORATION
ANKOR GAME INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

17 JAN 31 AM 9:34
DEPARTMENT OF STATE
SP17000028333ABC
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January 31, 2017

FLORIDA DEPARTMENT OF STATE
Division of Corporations

FASTKIT

SUBJECT: ANKOR GAME INC.
REF: W17000008809

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Tyrone Scott
Regulatory Specialist II
New Filings Section

FAX Aud. #: H17000028333
Letter Number: 717A00001921

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: ANKOR GAME INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

2125 BISCAYNE BOULEVARD - 580A
MIAMI FLORIDA 33137

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TRANSACT ANY LEGAL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES OF U.S. \$ 1 EACH

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SILVIA TURRI Name and Title: PRESIDENT/DIRECTOR

Address:

Address:

2125 BISCAYNE BLVD - 580A
MIAMI FLORIDA 33137

Name and Title: ALESSANDRO VERTICALE Name and Title: TREASURER/SECRETARY/DIR.

Address:

Address:

2125 BISCAYNE BLVD - 580A
MIAMI FLORIDA 33137

Name and Title:

Name and Title:

Address:

Address:

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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: Ugo V. Chiarato
Address: Certified Public Accountant
Florida & New York States
2125 Biscayne Boulevard Suite 580 A
Miami, Florida 33137

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: SILVIA TURRI
Address: 2125 BISCAYNE BLVD 580 A
MIAMI, FLORIDA 33137

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: FEBRUARY 1, 2017 (OPTIONAL)
(If no 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 or the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Ugo V. Chiarato JAN 30, 2017
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.

[Signature] JAN 30, 2017
Required Signature/Incorporator Date