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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name

: LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

Phone

: (305)552-5973

Fax Number

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| Email Address: | | | | |
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FLORIDA PROFIT/NON PROFIT CORPORATION UBERIT CORP.

| Certificate of Status | 0 |
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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

| Uberit corp. | |
|---|--|
| ARTICLE II PRINCIPAL OFFICE; | |
| The principal street address and mailing address is: 16115 SW 117 AVC # A10 Micami, FL. 33137 | |
| ARTICLE III SHARES: The number of shares of stock is: | |
| ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS: | |
| Ricardo Acuna Jiz (president) | ۸ |
| Picardo Acuña SP. (V.D) | . 구 :: ::::::::::::::::::::::::::::::::: |
| | الله. المراجعة المراجعة |
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| | |
| ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: | |
| The name and Florida street address (PO Box not acceptable) of the registered agent is: | |
| | |
| The name and Florida street address (PO Box not acceptable) of the registered agent is: RICARDO ACUNA JR 1015 SW 117 AVR #AIO | |
| | |
| The name and Florida street address (PO Box not acceptable) of the registered agent is: RICARDO ACUNA JR 1015 SW 117 AVR #AIO | |
| The name and Florida street address (PO Box not acceptable) of the registered agent is: RICARDO ACUNA JR 1015 SW 117 AVO #A10 MIGMI FL 33177 ARTICLEVI INCORPORATOR: The name and address of the Incorporator is: | |

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Required Signatures:

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

Registered Agent

3-6-17

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.

Incorporator

3-6-17

Date