Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I200000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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

Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION

ROF GROUP, INC

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

2ND REQUEST

Electronic Filing Menu

Corporate Filing Menu

Help

M. MOON MAY 05 2017

H 17000122982 ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

| ARTICLE I NAME: The name of the corporation is: |
|---|
| ROF Group, Inc |
| ARTICLE II PRINCIPAL OFFICE: |
| The principal street address and mailing address is: |
| Miami, FL 33155 |
| ARTICLE III SHARES: The number of shares of stock is: |
| ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS: Ricardo Oscar Fichtuer - President Adriana Yoshii - Vice - President |
| |
| |
| ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is: |
| Adriana Voshii |
| 5998 SW 44 Ter. |
| M10mi FL 33155 |
| ARTICLE VI INCORPORATOR: The name and address of the Incorporator is: HOTIONG TOSN'II 5998 SW) 44 Tex |
| Miami F1 33155 |

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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

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.

Date