Florida Department of State

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FLORIDA PROFIT/NON PROFIT CORPORATION R.A. LEVINE CONSULTING INC.

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

R.A. LEVINE CONSULTING INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3560 NORTHEAST 16TH AVENUE OAKLAND PARK, FL 33334

17 MAY 17 PM 2:57
ALLAHASSEE, FLORID

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,500 Shares at no par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

ROBERT LEVINE 3560 NORTHEAST 16TH AVENUE OAKLAND PARK, FL 33334

Prepared By:
Bruce B. Hubbard
238 W. Jericho Tumpike
Huntington Sta., NY 11746
1-516-935-3940

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ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

ROBERT LEVINE- President/Director 3560 NORTHEAST 16TH AVENUE OAKLAND PARK, FL 33334

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

ROBERT LEVINE 3560 NORTHEAST 16TH AVENUE, OAKLAND PARK, FL 33334

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

16th day of MAY 20 17

ROBERT LEVINE

Signature

17 MAY 17 PM 2: 57

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LA WS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: R.A. LEVINE C	ONSULTING INC.
2. The name and address of the registered agent and off	ice is:
ROBERT L	EVINE
	Name
3560 NOR	THEAST 16TH AVENUE
). Box or Mail Drop Box NOT Acceptable)
OAKI AND	PARK, FL 33334
<u> </u>	(City / State / Zip)
Having been named as registered agent and to accerboration at the place designated in this certifica agent and agree to act in this capacity. I further agrelating to the proper and complete performance of obligations of my position as registered agent.	te, I hereby accept the appointment as registered ree to comply with the provisions of all the statutes
RALL Lining	5/16/2017