

NOV/14/2017/TUE 05:37 PM

FAX No.

P. 001

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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**FLORIDA PROFIT/NON PROFIT CORPORATION
OLYMPUS TATTOO GALLERY INC**

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

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NOV 15 2017

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAMEThe name of the corporation shall be: OLYMPUS TATTOO GALLERY INC**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

9124 SW 227 LNCUTLER BAY, FL 33199**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFULL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: ADRIAN GARCIA FERNANDEZ (P)

Name and Title: _____

Address

9124 SW 227 LN

Address: _____

CUTLER BAY, FL 33199

Name and Title: _____

Name and Title: _____

Address

Address: _____

Name and Title: _____

Name and Title: _____

Address

Address: _____

17 NOV 14 AM 9:16
 STATE OF FLORIDA
 COUNTY OF DALLAS

APPROVED
 AND
 FILED

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: ADRIAN GARCIA FERNANDEZ
Address: 9124 SW 227 LN
CUTLER BAY, FL 33199

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ADRIAN GARCIA FERNANDEZ
Address: 9124 SW 227 LN
CUTLER BAY, FL 33199

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01/01/2018 (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

(X)

Required Signature/Registered Agent

11/09/2017

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.

(X)

Required Signature/Incorporator

11/09/2017

Date