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FEB 26 2018

x Brumbley

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

ARTICLE 1 NAME The name of the corpora			
ARTICLE II PRINC	RTICLE II PRINCIPAL OFFICE Principal street address		ess, if different is:
3232 CORAL WAY A	PT: 207		
CORAL GABLES, FL	33145		
ARTICLE III PURPO The purpose for which t	OSE the corporation is organized is:	ND ALL LAWFUL BUSINESS	
			7. S. 20
			- 8F
			B 23 F
ARTICLE IV SHAR The number of shares of ARTICLE V INTIL	ES 100 stock is: 4L OFFICERS AND/OR DIRECTORS Maria A. Sifontes De Van Der Biest e:	(P)	AH 9: 01
Name and Title Address	3232 CORAL WAY APT: 207	Name and Title: Address:	
	CORAL GABLES, FL 33145		
Name and Title	Eduardo Van Der Biest Sifontes	P Name and Title:	
Address	2032 CORAL WAY APT: 207	Address:	
	CORAL GABLES, FL 33145		
Name and Title	::	Name and Title:	
Address			
		-	

Name and Title:		Name and Title:		
Address		Address:		
ARTICI E VI	REGISTERED AGENT			
	Florida street address (P.O. Box NOT acceptable)	of the registered agent is:		
Name:	Maria A. Sifontes De Van Der Biest	_		
Address:	3232 CORAL WAY APT: 207	<u> </u>		
	CORAL GABLES, FL 33145	<u> </u>		
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>			
The name and a	address of the Incorporator is:			
Name:	Maria A. Sifontes De Van Der Biest			
Address:	3232 CORAL WAY APT: 207	_		
	CORAL GABLES, FL 33145	_		
ARTICLE VIII	EFFECTIVE DATE:			
Effective date, i	f other than the date of filing: date is listed, the date must be specific and can		after the	
Note: If the dat the document's	te inserted in this block does not meet the applicab effective date on the Department of State's record	le statutory filing requirements, this date will s.	not be listed as	
Having been na this certificate, l	amed as registered agent to accept service of proc am familiar with and accept the appointment as	ess for the above stated corporation at the pla registered agent and agree to act in this capac	ice designated in ity	
M	May In Sub Bust Required Signature/Registered Agent	02/21/2018		
	Required Signature/Registered Agent		Date	
I submit this do	cument and affirm that the facts stated herein a Depaytment of State constitutes a third degree fel	re true. I am aware that the false informatio lony as provided for in s.817.155, F.S.	n submitted in a	
	Maur Da & Birt	02/21/2018	3	
Reci	ured Signature/Incorporator		Date	