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Florida Department of State  
Division of Corporations  
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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
REGISTRATION SERVICES

FLORIDA PROFIT/NON PROFIT CORPORATION  
south florida luxury homes inc

Certificate of Status	0
Certified Copy	1
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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MAR 16 2018

T. SCOTT

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

**ARTICLE I NAME** SOUTH FLORIDA LUXURY HOMES, INC  
The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

900 BISCAYNE BLVD STE 3502

900 BISCAYNE BLVD STE 3502

MIAMI, FL 33132

MIAMI, FL 33132

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_

THE GENERAL NATURE OF BUSINESS OF THIS CORPORATION IS TO TRANSACT ANY  
AND ALL LAWFUL BUSINESS

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: SABINE OTAMENDI, (P,VP, T, S)

Name and Title: \_\_\_\_\_

Address 900 BISCAYNE BLVD STE 3502

Address: \_\_\_\_\_

MIAMI, FL 33132

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

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\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: SABINE OTAMENDI  
Address: 900 BISCAYNE BLVD STE 3502  
MIAMI, FL 33132

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:


Name: SABINE OTAMENDI  
Address: 900 BISCAYNE BLVD STE 3502  
MIAMI, FL 33132

**ARTICLE VIII EFFECTIVE DATE:**


Effective date, if other than the date of filing: \_\_\_\_\_ (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) Sabine Otamendi  3/12/18  
Required Signature/Registered Agent 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) Sabine Otamendi  3/12/18  
Required Signature/Incorporator Date