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Florida Department of State
Division of Corporations
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DIVISION OF CORPORATIONS
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FLORIDA PROFIT/NON PROFIT CORPORATION
MAGIC CITY PERKS INC

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MAR 29 2018

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

ARTICLE I NAMEThe name of the corporation shall be: MAGIC CITY PERKS INC**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

13181 SW 132ND TERR13181 SW 132ND TERRMIAMI FL 33186MIAMI FL 33186**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: COFFEE SHOP**ARTICLE IV SHARES**The number of shares of stock is: 100 SHARES AT 1.00 PER VALUE**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: PRESIDENT ANNA MONTERO

Name and Title: _____

Address: 13181 SW 132ND TERR

Address: _____

MIAMIFLORIDA 33186Name and Title: VICE-PRES HUMBERTO MONTERO

Name and Title: _____

Address: 13181 SW 132ND TERR

Address: _____

MIAMIFLORIDA 33186Name and Title: SECRETARY ELIZABETH GONZALEZ

Name and Title: _____

Address: 9060 SW 125 AVE APT C-103

Address: _____

MIAMIFLORIDA 33186

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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: HUMBERTO MONTERO
 Address: 13181 SW 132ND TERR
MIAMI FL 33186

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ANNA MONTERO
 Address: 13181 SW 132ND TERR
MIAMI FL 33186

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ARTICLE VIII EFFECTIVE DATE:Effective date, if other than the date of filing: MARCH 28, 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

[Signature]
 Required Signature/Registered Agent

MARCH 28, 2018
 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.

[Signature]
 Required Signature/Incorporator

MARCH 28, 2018
 Date

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