

P190000000342

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Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850) 617-6381

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Account Number : E20100000009  
Phone : (305) 599-0839  
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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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FLORIDA PROFIT/NON PROFIT CORPORATION  
D-Blockchain Solutions, Corp

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

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

**ARTICLE I NAME**

The name of the corporation shall be: D-Blockchain Solutions, Corp

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

c/o Pena & Associates PA

7480 Bird Rd. Suite # 510

Miami, FL 33155

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY AND ALL LAWFULL ACTIVITIES

**ARTICLE IV SHARES**

The number of shares of stock is: 21,000,000

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

Name and Title: Fritz M. Wagner / President

Address: 441 Creekline Place

Greenville, SC 29607

Name and Title: Gaston R. Wagner / Director

Address: 441 Creekline Place

Greenville, SC 29607

Name and Title: Cristina Wagner / Director

Address: 441 Creekline Place

Greenville, SC 29607

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

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

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

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

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

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

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: Cristina Wagner  
Address: c/o Pena & Associates PA  
7480 Bird Rd. Suite # 510, Miami, FL 33155

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: CRISTINA WAGNER  
Address: c/o PENAS & ASSOC. PA  
7480 BIRD Rd Suite 510  
MIAMI, FL 33155

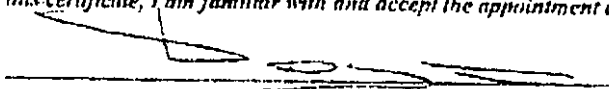
**ARTICLE VIII EFFECTIVE DATE:**

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.)

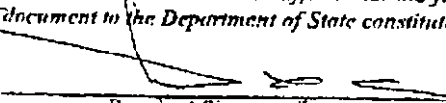
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

  
\_\_\_\_\_  
Required Signature/Registered Agent

12/14/2018  
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.*

  
\_\_\_\_\_  
Required Signature/Incorporator

12/14/2018  
Date