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FLORIDA PROFIT/NON PROFIT CORPORATION MMBB PROPERTIES CORP

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DIVISION OF CORPORATIONS

2019 JAN 25 PM 4:20

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

ARTICLE I NAMEThe name of the corporation shall be: MMBB Properties Corp**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address4302 SW 186 AVENUE

Mailing address, if different is:

MIRAMAR FL 33029**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: 1,000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: ADRIANA GONCALVES, MGR

Name and Title: _____

Address

4302 SW 186 AVENUE

Address: _____

MIRAMAR FL 33029Name and Title: MMBB PROPERTIES INC, P (A BRITISH VIRGIN ISLANDS Company)

Address

4302 SW 186 AVENUE

Address: _____

MIRAMAR FL 33029

Name and Title: _____

Name and Title: _____

Address

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: LUIS F ROSALES
Address: 5931 NW 173 DR UNIT 9
MIAMI FL 33015

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: LUIS F ROSALES
Address: 5931 NW 173 DR UNIT 9
MIAMI FL 33015

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
1/24/2019
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
1/24/2019
Date