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FLORIDA PROFIT/NON PROFIT CORPORATION URBAN LIVING CONTAINERS INC

Certificate of Status	0
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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt (s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

URBAN LIVING CONTAINERS INC

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

1198 VENETIAN WAY APT 312
MIAMI BEACH, FL 33139

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

FIVE HUNDRED (500) SHARES OF ONE DOLLAR (\$1.00) PAR VALUE COMMON STOCK

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS


The name and address of the initial registered agent is:

WALTER G. SCARFO
1198 VENETIAN WAY APT 312
MIAMI BEACH, FL 33139

ARTICLE V –INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are) :

WALTER G SCARFO 220 WASHINGTON AVE APT 3D MIAMI BEACH, FL 33139
PATRICIA A. LOCCIZANO 220 WASHINGTON AVE APT 3D MIAMI BEACH, FL 33139



Signature

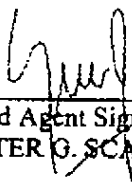
ARTICLE VI – DIRECTOR(S)

The name, title and address of the office(s) of this corporation shall be:

- (President) WALTER G SCARFO 220 WASHINGTON AVE APT 3D MIAMI BEACH, FL 33139
- (Vice-President) PATRICIA A. LOCCIZANO 220 WASHINGTON AVE APT 3D MIAMI BEACH, FL 33139
- (Secretary) PATRICIA A. LOCCIZANO 220 WASHINGTON AVE APT 3D MIAMI BEACH, FL 33139
- (Treasurer) WALTER G SCARFO 220 WASHINGTON AVE APT 3D MIAMI BEACH, FL 33139
- (Director) WALTER G SCARFO 220 WASHINGTON AVE APT 3D MIAMI BEACH, FL 33139
PATRICIA A. LOCCIZANO 220 WASHINGTON AVE APT 3D MIAMI BEACH, FL 33139

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.



Registered Agent Signature
WALTER G. SCARFO

DATE: 03/21/19