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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

: (305)552-5973

Phone Fax Number

: (305)675-5944

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email A	ddress:				
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## FLORIDA PROFIT/NON PROFIT CORPORATION

## **Grand Ocean Corporation**

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

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Corporate Filing Menu

Help

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## ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

	Grand Ocean corporation	
	ARTICLE II PRINCIPAL OFFICE:	
	The principal street address and mailing address is:	
	1835 East Hallandale Beach Blvrd Suite 775	_
	Hallandale Beach, FI 33009	
		_
RTICLE III	SHARES: The number of shares of stock is: 100	
, D <b>T</b> TΛ~τ	EW INITIAL DIDECTORS AND OR OFFICERS	
ARTICI		7.
D/P Hugo He	DIT OFFI	=======================================
		•••
		-
•		-
ARTICLE V	INITIAL REGISTERED AGENT AND STREET ADDRI	<u> E\$\$:</u>
he name and Flo	orida street address (PO Box not acceptable) of the registered a	gent i
Daniel Fuentes	835 East Hallandale Beach Blvrd Suite 385	
	Mallandale Beach, FI 33009	
	INCORPORATOR: The name and address of the Incorpora	ator i
<u>ARTICLE VI</u>		
ARTICLE VI Hugo H	lептега	
Hugo H	lerrera	

## Required Signatures:

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

Dayor fiertes	M47 31-254
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 5.827.155, F.S.

Mrs. 31- 3014"

Date