

7/30/2019

Division of Corporations

Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
YOY INC**

Certificate of Status	0
Certified Copy	1
Page Count	03
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ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: YOY INC**ARTICLE II PRINCIPAL OFFICE**Principal street address
9541 SUNRISE LAKES BLVDBUILDING # 130 APT: 306SUNRISE, FL 33322Mailing address, if different is:

_____**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: THE PURPOSE FOR THIS ENTITY IS IMPORT AND EXPORT.

_____**ARTICLE IV SHARES**The number of shares of stock is: 100 @ \$100.00 PER EACH**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: CARLOS ANDRES LOPES (P/T)Address 9541 SUNRISE LAKES BLVDBUILDING # 130 APT: 306SUNRISE, FL 33322

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

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Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:Name: CARLOS ANDRES LOPESAddress: 9541 SUNRISE LAKES BLVDBUILDING # 130 APT: 306 SUNRISE, FL 33322.**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: CARLOS ANDRES LOPESAddress: 9541 SUNRISE LAKES BLVDBUILDING # 130 APT: 306 SUNRISE, FL 33322.**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*Carlos Andres Lopes7/29/2019

Required Signature/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 s.817.155, F.S.*Carlos Andres Lopes7/29/2019

Required Signature/Incorporator

Date