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To:

Division of Corporations

Fax Number : (850)617-6381

Prom:

Account Name : LEGALING CORPORATE SERVICES INC.

Account Number : I20180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

Enter the email address for this business entity to be used for futer's annual report mailings. Enter only one email address please. Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION

Miami Events & Festivals Inc.

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To: 18506176381 From: 12147128131 Date: 10/01/19 Time: 2:26 PM Page: 02/03

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ARTICLES OF INCORPORATION

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

ICIFII PRINC	IPAL OFFICE		
RTICLE II PRINCIPAL OFFICE Principal street address 263 SW 37 AV., 807		Mailing add	lress, if different is
			2263 SW 37 AV., 807
mi, FL 33145		Miami, FL 33145	
		_	
ICLE III PURPO purpose for which the	OSE ne corporation is organized is:	y and all lawful business	

	stock is:	<u>ORS</u>	SECRETA
number of shares of	stock is:	<u>ORS</u>	SEGRE TARY TALLAHASSE
number of shares of TICLE V INITIA Name and Title	Mario Pi, Director	ORS Name and Title:	SEGRE MARY LET
number of shares of	stock is: I. OFFICERS AND/OR DIRECTO Mario Pi, Director	ORS Name and Title:	लंद
number of shares of TICLE V INITIA Name and Title	Mario Pi, Director 2263 SW 37 AV., 807	ORS Name and Title: Address:	E. F. ORIE
number of shares of TICLE V INITIA Name and Title	Mario Pi, Director 2263 SW 37 AV., 807 Miami, FL 33145	ORS Name and Title: Address:	E.F.O.
number of shares of TICLE V INITIA Name and Title Address	Mario Pi, Director 2263 SW 37 AV., 807 Miami, FL 33145	ORS Name and Title: Address:	E FLORIDA
number of shares of TICLE V INITIA Name and Title Address	Mario Pi, Director 2263 SW 37 AV., 807 Miami, FL 33145	Name and Title: Address: Name and Title:	E FLORIDA
number of shares of TICLE V INITIA Name and Title Address Name and Title	Mario Pi, Director 2263 SW 37 AV., 807 Miami, FL 33145	ORS Name and Title: Address: Name and Title: Address:	E. FLORIDA
number of shares of TICLE V INITIA Name and Title Address Name and Title	Mario Pi, Director 2263 SW 37 AV., 807 Miami, FL 33145	ORS Name and Title: Address: Name and Title: Address:	E FLORIBL
Name and Title Address Address	Mario Pi, Director 2263 SW 37 AV., 807 Miami, FL 33145	Name and Title: Address: Name and Title: Address: Address:	E. FLORIDA
Name and Title Address Address	Mario Pi, Director 2263 SW 37 AV., 807 Miami, FL 33145	ORS Name and Title: Address: Name and Title: Address:	E. FLORIDA
Name and Title Address Address	Mario Pi, Director 2263 SW 37 AV., 807 Miami, FL 33145	Name and Title:	E. FLORIDA

To: 18506176381 From: 12147128131 Date: 10/01/19 Time: 2:26 PM Page: 03/03

(((H19000292917 3)))

Name ar	nd Title:	Name and Title:
Address	s	Address:
	REGISTERED AGENT	N. Cale and A. Carrier de Company
Name:	Iorida street address (P.O. Box NOT acceptabl Mario R Pi	e) of the registered agent is:
Address:	2263 SW 37 AV., 807	·
Addicas.	Miami, FL 33145	
ARTICLE VII	<u>INCORPORATOR</u>	
The name and a	ddress of the Incorporator is:	
Name:	Nancy Luna	
Address:	10601 Clarence Dr., Stc. 250	
	Frisco, TX 75033	
ARTICLE VIII	EFFECTIVE DATE: other than the date of filing:	(OUTIONIAL)
(If an effective of filing.)	date is listed, the date must be specific and ca	nnot be more than five days prior or 90 days after the
	e inserted in this block does not meet the applications and the does not meet the application of State's record	able statutory filing requirements, this date will not be list ds.
Having been nur this certificate, I	med as registered agent to accept service of pro am familiar with and accept the appointment as	cess for the above stated corporation at the place design s registered agent and agree to act in this capacity
I/am	UKC	_ 10/1/0
7	Required Signature/Registered Agent	Date
I submit this doc document to the	cument and affirm that the facts stated herein Department of State constitutes a third degree f	are true. I am aware that the false Information submitte elony as provided for in \$.817.155, F.S.
	Maneu Lura	10/1/2019
Requi	ired Signature/Incorporator	Date