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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : FANJUL ENTERPRISES LLC

Account Number : I20190000080 Phone : (305)603-8791 Fax Number : (877)503-6086

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

Email Address:

## FLORIDA PROFIT/NON PROFIT CORPORATION ADVERTISING USA SOLUTIONS CORP

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## ARTICLES OF INCORPORATION

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

<u>ARTICLE I NAME</u>	ADVERTISING USA SOLU	JTIONS CORP	
The name of the corpora	tion shall be:	511710 OOTA	
ARTICLE II PRINC	Principal street address	Mailing add	lress, if different is:
8318 NW 7TH STREE	I API 88		
MIAMI, I'L 33126			
ARTICLE III PURPO	OSE the corporation is organized is:		·
ANY AND ALL LAW			
-		· · - · · · · · · · · · · · · · · · · ·	<del></del>
			<b>&gt;</b> 20
ARTICLE IV SHAR The number of shares of	ES 1000		<b>A</b> 語 6
The number of states of	SWCE IS.	<del></del>	. ∧S.
ADTICLE V INITL	AL OFFICERS AND/OR DIRECTORS		<u> </u>
	IOSE C POSADA-P		
Name and Titl	c:	Name and Title:	m c:
Address	8318 NW 7TH STREET APT 88	Address:	GIRC Strict
	MIAMI, FL 33126		<u>₹</u> .
N ATT		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Name and Title		Name and Title:	
Address		Address:	
Name and Title		Name and Title:	
Address		Address:	
			· · · · · · · · · · · · · · · · · · ·

Name and	Title:	Name and Title:
Address		Address:
	REGISTERED AGENT	. Oak in
Name:	orida street address (P.O. Box NOT acceptable)  JOSE C POSADA	of the registered agent is.
Address:	8318 NW 7TH STREET APT 88	_
	MIAMI, FL 33126	<del>-</del>
ARTICLE VII	<u>INCORPORATOR</u>	
The name and ad	dress of the Incorporator is:	
Name:	JOSE C POSADA	_
Address:	8318 NW 7TH STREET APT 88	
	MIAMI, FL 33126	<del></del>
Effective date, if	EFFECTIVE DATE: other than the date of filing: ate is listed, the date must be specific and can	. (OPTIONAL) not be more than five days prior or 90 days after t
Note: If the date	inserted in this block does not meet the applicable feetive date on the Department of State's records	le statutory filing requirements, this date will not be li s.
	ned as registered agent to accept service of proce om familiar with and accept the appointment as r	rss for the above stated corporation at the place designersistered agent and agree to act in this capacity
X		10/4/19
	Required Signature/Registered Agent	Dute
	ument and affirm that the facts stated herein ar Department of State constitutes a third degree fek	re true. I am aware that the false information submony as provided for in s.817.155, F.S.
FF.	··	10/4/19
Resum	red Signature/Incorporator	Date