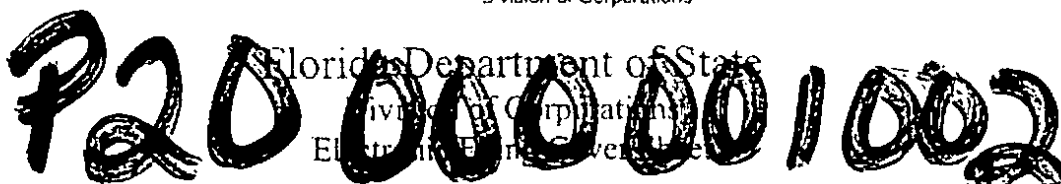


1/6/2020

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000005270 3)))



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**FLORIDA PROFIT/NON PROFIT CORPORATION
CREWT HOSPITALITY CORP**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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

ARTICLE I NAME

The name of the corporation shall be: CREW HOSPITALITY CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

11389 NE 8TH AVE
BISCAYNE PARK, FL 33161

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

PROFESSIONAL HOSPITALITY RECEIVING SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ELIZABETH CASTILLO

FOUNDER CEO

Name and Title: _____

Address: 11389 NE 8TH AVE

Address: _____

BISCAYNE PARK, FL 33161

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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TALLAHASSEE, FL

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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: ELIZABETH CASTILLOAddress: 11389 NE 8TH AVE
BISCAYNE PARK, FL 33161ARTICLE VII INCORPORATORThe name and address of the Incorporator is:Name: ELIZABETH CASTILLOAddress: 11389 NE 8TH AVE
BISCAYNE PARK, FL 33161

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TALLAHASSEE, FL

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

Elizabeth Castillo
Required Signature/Registered Agent1/3/2020
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.817.153, F.S.

Elizabeth Castillo
Required Signature/Incorporator1/3/2020
Date