

Division of Corporations Electronic Filing Cover Sheet

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.

(((H20000188452 3)))



H200001984523ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

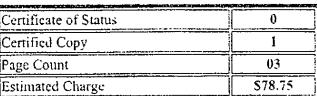
Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305)444-4994 Fax Number : (305)444-4977

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 JUDITHSMARKET, INC.



028 JUN 19 PH

()

Electronic Filing Menu

Corporate Filing Menu

Help



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

ARTICLE II PRINCIPAL OFFICE Principal street address 770 CLAUGHTON ISLAND DR. STE: 1605		Mailing address, if different is: 770 CLAUGHTON ISLAND DR. STE: 1605		
MIAMI, FL 3313	1	MIAMI, FL 33131		
ARTICLE III PUI The purpose for which		ALL LAWFUL BUSINESS		
			2828 JUN 19	
ARTICLE IV SH. The number of shares	ARES s of Stock is: SHARES: 100 @ \$1.00	····	P	
	TIAL OFFICERS AND/OR DIRECTORS			
	VUDITH WATSON (P/S/D)		% — N	
		Name and Title:	*5 N	
Name and	770 CLAUGHTON ISLAND DR.		* R	
		Address:	* R	
Address	770 CLAUGHTON ISLAND DR. STE: 1605	Address:		
Address	770 CLAUGHTON ISLAND DR. STE: 1605 MIAMI, FL 33131	Address: Name and Title:		
Address Name and T	770 CLAUGHTON ISLAND DR. STE: 1605 MIAMI, FL 33131 iile: RANGE ALFONSO (V/D)	Address: Name and Title:		
Address Name and T	770 CLAUGHTON ISLAND DR. STE: 1605 MIAMI, FL 33131 iile: RANGE ALFONSO (V/D) 770 CLAUGHTON ISLAND DR.	Address: Name and Title:		
Address Nume and T Address	770 CLAUGHTON ISLAND DR. STE: 1605 MIAMI, FL 33131 iile: RANGE ALFONSO (V/D) 770 CLAUGHTON ISLAND DR. STE: 1605	Address: Name and Title: Address:		

Name an	d Title:	Name and Title:	
Address		Address:	
ARTICLE VI	REGISTERED AGENT		
he <u>name and F</u> Name:	Inrida street address (P.O. Box NOT acceptable) of YUDITH WATSON	the registered agent is.	
Address:	770 CLAUGHTON ISLAND DR. STE: 1605	- -	
	MIAMI, FL 33131	-	
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>		288 JUN 19
The name and a	ddress of the Incorporator is:		
Name;	YUDITH WATSON	_	
Address:	770 CLAUGHTON ISLAND DR, STE: 1605	_	~~``.
	MIAMIL FL 33131	_	PH 4
Effective date, if	EFFECTIVE DATE: fother than the date of filing; date is listed, the date must be specific and cannot	(OPTIONAL)	M days after the
iling.) <u>Note:</u> If the date	e inserted in this block does not meet the applicable effective date on the Department of State's records.	e statutory filing requirements, this di	
laving been na ertificate, I am	med as registered agent to accept service of process j familiar with and accept the appointment as registe	for the above stated corporation at the	place designated in thi acity
s/ Yudil	h Walson Required Signature/Registered Agent		Date
locumênt to the	cument and affirm-that the facts stated herein are Department of State constitutes a third degree felor	e true. I am aware that the false infi ny as provided for in s.817.155, F.S.	ormation submitted in
/s/ Gudit	h Walson ure/Incorporator	Date	