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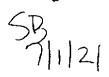
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To: 18506176381

## ARTICLES OF INCORPORATION

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

IRTICLE II PRINCIPAL OFFICE Principal street address  Mailing address, if different is:  (Game)  IRTICLE III PURPOSE The purpose for which the corporation is organized is: (Ali Mpail)  IRTICLE IV SHARES The number of states of stock is: 100  IRTICLE V INTIAL OFFICERS AND/OR DIRECTORS  Name and Title: TRAN GIRAN Medina-P Name and Title: Are: Are: Are: Are: Are: Are: Are: Ar	e name of the corporati	ion shall be: N.G Auto Collis	sion Kelpair Lorp	•
RTICLE IV SHARES the purpose for which the corporation is organized is:	RTICLE II PRINC	IPAL OFFICE	1 1	ddress, if different is:
RTICLE IV SHARES  The number of shares of stock is: 100  RTICLE V INITIAL OFFICERS AND/OR DIRECTORS  Name and Title:	1906 SW 137 B	1. miami, Fl 33175	(same)	
Name and Title:	RTTCLE III PURPO e purpose for which th	SE oc corporation is organized is:	rupair	
Name and Title:				,
Name and Title:				
Name and Title: Name and Title	TICLE IV -SHARE	2 <u>S</u>		
Address 4906 SW 137 U Address: 132 S S S S S S S S S S S S S S S S S S S	TICLE V INTIA	L OFFICERS AND/OR DIRECTORS	0	21 . SEC TALLL
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Address Address:			Name and Title:Address:	
	Address		Name and Title: Address:	

Name and T	itle:	Name and Title:	
Address		Address:	
	GISTERED AGENT ida street address (P.O. Box NOT acceptable) o	f the registered agent is:	FILE® 21 JUN 30 PM 1: 24 SLORE LARY OF VIALE FALLAHASINE FIRE
Name:	Ilan Gieao Medino	-	FILE ELGRE LARY LLAHASSA
Address:	4706 SW 137 8f.	<del></del>	
-	miami, 71 33175	-	
ARTICLE VII IN	CORPORATOR		igen (F
The name and addi	ress of the Incorporator is:		
Name:	Ilean Girao Meding 4904 SW 137 tf.	_	
Address:	4904 SW 137 th.	<del>-</del>	
	miami 7/ 33/75	***	
Effective date, if of	EFFECTIVE DATE: her than the date of filing: the is listed, the date must be specific and cannot	. (OPTIONAL of be more than five days p	) rior or 90 days after the
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Having been name this certificate, I an	d as registered agent to accept service of process familiar with and accept the appointment as re	s for the above stated corpo gistered agent and agree to t	ration at the place designated in act in this capacity
	100		04 28 2021
	Required Signature/Registered Agent		Derc
I submit this document to the De	ment and uffirm that the facts stated herein are epartment of State constitutes a third degree felo	true. I am aware that the j ny as provided for in 8.8.17.1	55, F.S.
	1016		06 28 2021
Require	d Signature/incorporator		ı Datê