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CORPORATE WACCESS, _____

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN						
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XX	CERTIFIED COPY PHOTOCOPY CUS					
XX	FILING	INC				
1. 2.	THE CODE OF HONO (CORPORATE NAME AND DOCU	OR MARKETING CORP. MENT #)				
2	(CORPORATE NAME AND DOCU	MENT #)				
3.	(CORPORATE NAME AND DOCU	MENT #)				
4.	(CORPORATE NAME AND DOCU	MENT #)				
5.	(CORPORATE NAME AND DOCU	MENT #)				
6.	(CORPORATE NAME AND DOCUME	MENT #)				
SPECIA INSTRU	AL UCTIONS:					

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

ARTICLE 1 NA The name of the cor		OR MARKETING CORF	.
<u>ARTICLE II PI</u>	RINCIPAL OFFICE Principal street address	Mailing a	ddress, if different is:
1420 NE MIAM	II PL APT 2815		
MIAMI, FL 3313	32		
ARTICLE III PU The purpose for wh		wful purpose	
	-		2027 S.E.
			FE T
ARTICLE IV SI The number of share	HARES es of stock is: 200		AHASSEE.
ARTICLE V IN	ITIAL OFFICERS AND/OR DIRECTORS		. FL 9: 01
Name and	Title: ENMANUEL GRULLON-PRESIDENT	Name and Title:	•
Address	1420 NE MIAMI PL		
	APT 2815		
	MIAMI, FL 33132		
Name and 1	Fitle:	_ Name and Title:	
Address		Address:	
Name and T	Fitle:	Name and Title:	
Address		_ Address:	

Name and	Title:	Name and Title:	
Address			
			.
ARTICLE VI R	EGISTERED AGENT irida street address (P.O. Box NOT acceptable	of the registered agent is:	
Name:	ENMANUEL GRULLON		
Address:	1420 NE MIAMI PL APT 2815		
	MIAMI, FL 33132	<u> </u>	
ARTICLE VII	INCORPORATOR		
The name and ad	dress of the Incorporator is:		
Name:	ENMANUEL GRULLON	- 	
Address:	1420 NE MIAMI PL APT 2815	<u>-</u> -	·
	MIAMI, FL 33132		
Effective date if	EFFECTIVE DATE: other than the date of filing:	. (OPTIONAL)	on OO down after the
(If an effective d filing.)	ate is listed, the date must be specific and ca	anot be more than five days prior	or so days after the
Note: If the date the document's e	inserted in this block does not meet the applic ffective date on the Department of State's reco	able statutory filing requirements, thirds.	is date will not be listed as
Having been nan certificate, I am f	ned as registered agent to accept service of proc Camiliar with and accept the appointment as reg	rss for the above stated corporation at istered agent and agree to act in this	the place designated in this capacity
ENM	rance Ighlon		02/08/2022
	Required Signature/Registered Agent		Date
I submit this doc document to the	ument and affirm that the facts stated herein Department of State constitutes a third degree f	are true. I am aware that the false elony as provided for in s.817.155, F.	information submitted in a S.
En	nanual antlon		02/08/2022
Required Signatu	ire/Incorporator	Date	