

To:

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2022-06-27 19:09:05 GMT

13053284774

From: Yanet Avila

6/27/22, 2:58 PM

Division of Corporations

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Florida Department of State
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**FLORIDA PROFIT/NON PROFIT CORPORATION
B-1 BLACK LIMO CORP**

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13053284774

From: Yanet Avila

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: B-1 BLACK LIMO CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1079 NW 114TH ST

MIAMI, FL 33168

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: BELANSE ORIOL (P)

Name and Title: _____

Address 1079 NW 114TH ST

Address: _____

MIAMI, FL 33168

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

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ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: BELANSE ORIOL
Address: 1079 NW 114TH ST
MIAMI, FL 33168

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: BELANSE ORIOL
Address: 1079 NW 114TH ST
MIAMI, FL 33168

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

/s/ Belanse Oriol _____
Required Signature/Registered Agent 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.817.155, F.S.

/s/ Belanse Oriol _____
Required Signature/Incorporator Date

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TALLAHASSEE, FL 32307