

Florida Department of State
 Division of Corporations
 Electronic Filing Service

P2300062882

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.

(((H23000300058 3)))



H230003000583ABCV

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 : RASI
 Account Number : I20220000023
 Phone : (800)221-2972
 Fax Number : (917)243-5843

****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
 BIG WINS CORP.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

RECEIVED

2023 AUG 29 PM 2:01

CORPORATIONS
 COMMERCIAL
 SERVICES

23 AUG 29 AM 1:06
 FILED

FILED

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: BIG WINS CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address: 300 SUNNY ISLES BLVD #1705
SUNNY ISLES BEACH, FL 33160
Mailing address, if different is: _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: CONSULTING AND REAL ESTATE

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JILLIAN RODRIGUEZ, DIRECTOR Name and Title: _____
Address: 300 SUNNY ISLES BLVD #1705 Address: _____
SUNNY ISLES BEACH, FL 33160
Name and Title: _____ Name and Title: _____
Address: _____ Address: _____
Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

23 AUG 29 AM 11:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Name and Title: _____ Name and Title: _____
 Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: JILLIAN RODRIGUEZ
 Address: 300 SUNNY ISLES BLVD #1705
SUNNY ISLES BEACH, FL 33160

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JILLIAN RODRIGUEZ
 Address: 300 SUNNY ISLES BLVD #1705
SUNNY ISLES BEACH, FL 33160

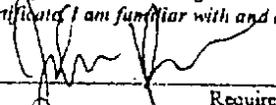
ARTICLE VIII EFFECTIVE DATE:

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.)

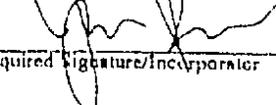
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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



 Required Signature/Registered Agent: _____ Date: 08/28/2023

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.



 Required Signature/Incorporator: _____ Date: 08/28/2023

23 AUG 29 AM 10:07
 FILED
 STATE DEPARTMENT OF STATE
 TALLAHASSEE, FLORIDA