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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : RCA ACCOUNTING SERVICES CORP

Account Number : I20180000102 Phone : (305)799-7633

Fax Number

: (305)564-6857

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please, \*\*

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## FLORIDA PROFIT/NON PROFIT CORPORATION **BLUEKING GROUP CORP**

Certificate of Status	1
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Address: 8434 NW 66<sup>TH</sup> ST

MIAMI, FL 33166

## 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: BLUEKING GROUP CORP	
ARTICLE II PRINCIPAL OFFICE	
Principal street address	Mailing address, if different is:
8434 NW 66 <sup>TH</sup> ST MIAMI, FL 33166	SAME AS PRINCIPAL
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: YSMAEL J. RODRIGUEZ /P	
Address: 8434 NW 66 <sup>TH</sup> ST	
MIAMI, FL 33166	2026 1
	: :
	Ċ
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the registered	
Name YSMAEL J. RODRIGUEZ	$\frac{\omega}{2}$

## ARTICLE VII INCORPORATOR

The	name	and	address	of the	Incorporate	ır is:
-----	------	-----	---------	--------	-------------	--------

Name: YSMAEL J. RODRIGUEZ

Address: 8434 NW 66<sup>TH</sup> ST MIAMI, FL 33166

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.)

<u>Note:</u> 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

IAI YSma	(a) J.	Rodriave 2	05/17/2024
		uired 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.

121 Ysman	( ). Rodrauez	05/17/2024	2
	Required Signature/Incorporator	Date	HI PA
			- 22