

P95000027/81

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: BLUE LIGHTNING, INC
(Proposed corporate name - must include suffix)

RECEIVED 11:41 PM APR 3 1995
-04/05/95--01013--002
*****70.75 *****70.75

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM:

LUIS A. VALDES
Name (printed or typed)

8212 SW 140 COURT
Address

MIAMI FL 33183
City, State & Zip

(305) 385-7082
Daytime Telephone number

FILED
95 APR -3 AM 8:51
SECRETARY OF STATE
TALLAHASSEE FLORIDA

B. REGISTER APR 6 1995

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: BLUE LIGHTNING, INC

FILED
95 APR -3 11 8 51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

8212 SW 140 Court
MIAMI FL 33183

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ONE THOUSAND (1,000)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ANA VALDES
8441 SW 40 Street
MIAMI, FL 33155

FILING FEE: \$70.00

ARTICLE V INCORPORATOR(S)


See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

LUIS A VALDES
8212 SW 140 Court
MIAMI, FL 33183

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

29 day of MARCH, 1995.



Signature LUIS A. VALDES

Signature _____

Signature _____

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: BLUE LIGHTNING, INC

2. The name and address of the registered agent and office is:

ANA VALDES
(Name)

8441 SW 40 Street
(P.O. Box ~~not~~ acceptable)

MIAMI FL 33155
(City/State/Zip)

FILED
APR -3 11 8 51
95
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Ana Valdes
(Signature)

3/29/95
(Date)