

	City/State	IDA 33174 (305)553 Zip Phone # SENTATIVE TALLAHA		Office	Use Only		
	CORPORATION 1. P U C (Con) 2. (Con) 3. (Con)	NAME(S) & DOCUMI Oration Name) Poration Name) Poration Name)	ENT NUMBE	CR(S), (if known CR(S), (if known cent #) cent #)	SEUTE LANGE FILE		
X		Pick up time Will wait PI AMENDMENT Amendment Resignation of R.A., Change of Registered Dissolution/Withdray Merger	Officer/ Director	2	рру	277 -0105 0 **	252 9004 **122,50
	OTHER FILINGS Annual Report Fictitious Name Name Reservation	REGISTRAT REGISTRAT OUALIFICA Foreign Limited Partnership Reinstatement Trademark Other	ION I		JIVISION OF CORFOR	97 JUN 16 AP	RECEN
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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:

AURIGA TRUST CORPORA BOW.

ARTICLE II PRINCIPAL OFFICE

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

1221 Brickell Ave 9th Floor

MIAMI, FLORIDA 33/31

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: $loo(one\ hondeed)$

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GIANCARIO MANNARINO
1221 BRICKELLI AVE 9th Flore
MISMI, Florish 33131

ARTICLE V INCORPORATOR(S)

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

GIBNEARLO MANNARINO
1221 BRICKEN AUR 9 & Floor
MIAMI, Fl 33131

ARTICLE VI DIRECTOR(S)

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

Giamesalo Mannarino 1221 Brickey Ave 98 flor MIAMI, Fl 33131

Signature
Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 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.

ſhe	name of the corporation is: Auriga Trust Corpor
he	name and address of the registered agent and office is:
	GIBNESELO MANNARINO
	(NAME)
	1221 Brickell Ave 9th Floor
	(P.O. BOX NOT ACCEPTABLE)
	MISMI F/ 33/3/ (CITY/STATE/ZIP)
	(CITY/STATE/ZIP)

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.

SIGNATURE AMAZONI LEO SECRETARIO SIANE SIGNATURE AMAZONI LEO SIANE DATE SIANE SIGNATURE SIGNATUR

REGISTERED AGENT FILING FEE: \$35.00