P980000000166978

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	10	00024360 -02/20/98010 *****78.00	1314 037001 *****878.00
SUBJECT:	ate name - must include suff		_
Enclosed is an original and one(1) copy of the articles	s of incorporation and a c	theck for ·	The c
\$70.00 \$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy & Certificate	
FROM: Robert E, C. Name (Printed 1180 N, W. 26 Addres Addres City, State of Daytime Telepho	LAVE # 2 ss la. 33136 & Zip -6340	ALLAHASSEE, FLOR	TILED AN 9: 04

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

MA JOSE

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:

COFFRIETNC

98 FEB 20 AM 9: 04
DIVALLAHA SSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

1180 N.W. 200 Ave # 2 Mlami, Fl. 33136

ARTICLE III SHARES

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

20

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Robert E. Carr

1180 Niw. 200 Due Mani, Fla. 33136 Suite #2

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):

Robert E. Carr 1180 NW 2nd Ave Miami, Fla. 33136 Ste. #2

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

14 day of February, 19 98

(An additional article must be added if an effective date is requested.)

Signature

COHERTE

Signature

CLE

Signature

Notarization is not required

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, 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	COHERTE INC.	*.
2. The name and address of the red (P. O	Eistered agent and office is: (NAME) (NAME) (NAME) (NAME) (NAME) (CITY/STATE/ZIP) DIVISION OF THE CORR AND HORSELE AND AND HORSELE AND AND HORSELE AND AND HORSELE AND	

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) 2-14(DATE)