

TRANSMITTAL LETTER

P980000 82413

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

SUBJECT: ALPHA SUFFRIN SERVICES INC.
(Proposed corporate name - must include suffix)

300002645193--7
-09/21/98--01134--018
****131.25 ****131.25

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: PIERRE SIMON SUFFRIN
Name (Printed or typed)

2120 NW 131 ST PO. Box 680009
Address Miami, FL 33168

MIAMI, FL 33167
City, State & Zip

(305)-835-2727
Daytime Telephone number

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 SEP 21 AM 11:02

B. BROCK SEP 23 1998

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

ALPHA SUFFRIN SERVICES INC.

ARTICLE II PRINCIPAL OFFICE

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

PO BOX 680009
MIAMI, FL 33168

ARTICLE III SHARES

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

ONE SHARE OF STOCK

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

PIERRE SIMON SUFFRIN
2120 NW 131 ST
MIAMI, FL 33167

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

PIERRE SIMON SUFFRIN
2120 NW 131 ST
MIAMI, FL 33167

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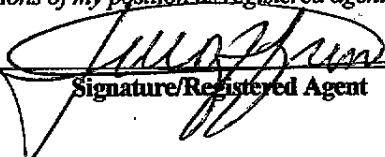
Signature/Incorporator

9-1-98

Date

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

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/Registered Agent

9-1-98

Date