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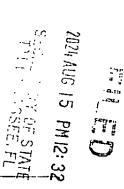
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FLORIDA PROFIT/NON PROFIT CORPORATION CAMILO AWNINGS CORP.

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

	NCIPAL OFFICE Principal <u>street</u> address	Mailing address, if different is: 1301 PALM AVE APT 206 HIALEAH, FL 33010			
<u>01 PALM AVE AP</u> ALEAH, FL 330	T 206				
		<u> </u>			
ETICLE III PUR e purpose for whic	POSE h the corporation is organized is: ANY AN	ID ALL LAWFUL BUSINE	:SS		
444					
			2024 AUG 15		
number of shares	<u>RES</u> of stock is: SHARES: 100 @ \$1.00				
W. C. C. 1	THE OFFICERS AND OF THE OFFICE		(·)		
	TAL OFFICERS AND/OR DIRECTORS CAMILO DENA GONZALEZ	. D	rr gene		
	itle: CAMILO PENA GONZALEZ - 1301 PALM AVE APT 206		# 32 # 32		
Address		Address:	11, 10		
	HIALEAH, FL 33010				
Name and Tit	le:	Name and Title:			
Address		Address:	¥0.11 42.13		
	44-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4				
			 _		
Name and Tit	le:	Name and Title:			
Address					

Name and Title:		Name and Title:				
Address		Address:				
				·		
	REGISTERED AGENT lorida street address (P.O. Box NOT acceptable)	of the registered agent is:				
Name:	CAMILO PENA GONZALEZ		ch.	20		
Address:	1301 PALM AVE APT 206			24 A	; ;	
	HIALEAH, FL 33010			JE 1	े । ***द्वार !*!अदेशके	
ABTIOLO IVI	AVCONDOR (TOR		15.5 15.5 15.5 15.5 15.5 15.5 15.5 15.5	2024 AUG 15 PM I2: 32		
ARTICLE VII	INCORPORATOR		aas:	Ĭ	graen)	
The name and address of the Incorporator is:			F 4		•	
Name:	CAMILO PENA GONZALEZ		L H	\approx		
Address:	1301 PALM AVE APT 206					
	HIALEAH, FL 33010	· 				
Effective date, if	EFFECTIVE DATE: other than the date of filing: date is listed, the date must be specific and can	. (OPTIONAL) not be more than five days prid	or or 90 da	ys after	· the	
Note: If the date the document's e	e inserted in this block does not meet the applicab effective date on the Department of State's record	le statutory filing requirements, s.	this date wi	ill not b	e listed as	
Having been nun certificate, I am f	ned as registered agent to accept service of process familiar with and accept the appointment as regist	for the above stated corporation ered agent and agree to act in th	at the place is capacity	e design	ated in this	
Camilo Per						
	Required Signature/Registered Agent			Date		
I submit this doc	rument and affirm that the facts stated herein ar	e true. I am aware that the fals	e informati	ion subi	nitted in a	
	Department of State constitutes a third degree felo	my as provided for in s.817.155, .	F.S.			
CAMILO PER CAMIFO FORE (AUR 15, 201-						
Required Signature/Incorporator		Date				