

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

P25000006823

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
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RECEIVED

2015 FEB -6 PM 4:01

STATE OF FLORIDA

**FLORIDA PROFIT/NON PROFIT CORPORATION
BLUEPEAK ELEVATION GROUP INC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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Corporate Filing Menu

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FILED
OFFICE OF STATE
CORPORATIONS

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

Bluepeak Elevation Group

ARTICLE II PRINCIPAL OFFICE:

INC

The principal street address and mailing address is:

66 W Flagler St 8th
FLOOR Miami FL 33130

ARTICLE III SHARES: The number of shares of stock is:

100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Deivys Gonzalez OLIVA
(P)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Deivys Gonzalez OLIVA
66 W Flagler St 8th
FLOOR Miami FL 33130

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Deivys Gonzalez OLIVA
66 W Flagler St 8th
FLOOR Miami FL 33130

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TALLAHASSEE

Required Signatures:

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Registered Agent _____ Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Incorporator _____ Date

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