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PICK-UP	☐ WAIT	MAIL
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TALLAHASSEE, FI ORIGINA

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## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 24, 2012

JULIANO FERRAZ 1840 N LAKE BRENTWOOD RD AVON PARK, FL 33825-2119

SUBJECT: FERRAZ, INC Ref. Number: W12000010872

We have received your document for FERRAZ, INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Justin M Shivers Regulatory Specialist II New Filing Section

Letter Number: 612A00007812

## **COVER LETTER**

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

SUBJECT: FOLLA Z. MC (PROPOSED CORPORA	TE NAME – <u>MUST IÑC</u>	LUDE SUFFIX)	_
Enclosed are an original and one (1) copy of the art	icles of incorporation an	d a check for:	
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
	ADDITIONAL C	OPY REQUIRED	
FROM: Sulvano Ferraz	e (Printed or typed)		
1840 N. Lake Bren	Address	SECO TALL/	2012
Avon Pash, City,	State & Zip	HASSEE.	から
863-399-66  Daytime T	298 elephone number	F STATE PLONIOA	B
Ferraz Jewo ve Co	d for future annual report		

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

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

ARTICLE I NAME The name of the corporation	shall be: Ferraz. Inc.		
ARTICLE II PRINCI	PAL OFFICE  acipal street address  Lane Decomposition R.  Porch FL 33835-3119	Mailing	g address, if different is:
The purpose for which the c			
ARTICLE IV SHARE The number of shares of stock ARTICLE V INITIAL		s	
Name and Title: Hoc Address: \\		Name and Title:Address:	
Address: 1840	1000 FRITAZ - P 2 N Loure Brown 2001 Rd 10 Harry T. 33835 20119	, Address:	
A .1.4		A J J	
The name and Florida street Name: Address:  ARTICLE VII INCORF The name and address of the Name:	PERED AGENT  t address (P.O. Box NOT acceptable) of  Alicano Ferra 2  40 N Cube Stendwood P  PORATOR  Incorporator is:  Alicano Ferra 2  40 N Cube Brendwood P  On Cube Brendwood	aliq	PILED  2012 APR -2 AM III: 37  SECRETARY OF STATE ALLAHASSEE. FLORIDA
this certificate, I am fumiliar	ntered agent to accept service of process with and accept the appointment as regional accept the accep	for the above stated cor stered agent and agree to	poration at the place designated in act in this capacity  Date
document to the Department	affirm that the facts stated herein are of State constitutes a third degree felony Required Signature/Incorporator	true. I am aware that the as provided for in s.817.	e false information submitted in a 155, F.S.  Label Date   2000