

P13000066893

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

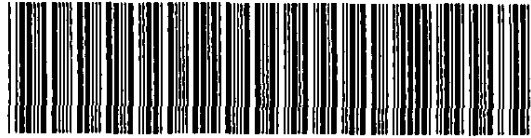
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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08/09/13--01012--004 \*\*87.50

13 AUG 13 PM 3:00  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

COVER LETTER

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

SUBJECT: Brazilian American Exports, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee  
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy  
 \$87.50 Filing Fee, Certified Copy & Certificate of Status  
**ADDITIONAL COPY REQUIRED**

FROM: DARREN COVAR  
Name (Printed or typed)

10 FAIRWAY Drive, Suite 202  
Address

Deerfield Beach FL 33441  
City, State & Zip

954-312-3662  
Daytime Telephone number

DARREN. COVAR @ yahoo.com  
E-mail address: (to be used for future annual report notification)

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: Brazilian American Exports, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

10 Fairway Drive  
Suite 202  
Deerfield Bch Fl 33441

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Import and Export  
products between the United States, other  
Countries, and Brazil.

**ARTICLE IV SHARES**

The number of shares of stock is: 3

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Darren Covar, P Name and Title: Lucia Melo, VP

Address: 10 Fairway Dr Address: \_\_\_\_\_

Suite 202 → Same

Deerfield Bch Fl 33441

Name and Title: Fabiana Covar, Treasurer Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Same

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

13 AUG 13 PM 3:00

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
 Address: \_\_\_\_\_ Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Law Offices of Darren Covar, PA  
 Address: 10 Fairway Dr. #202  
Deerfield Bch Fl 33441

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Darren Covar  
 Address: 10 Fairway Dr. #202  
Deerfield Bch Fl 33441

*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*

[Signature]  
 Required Signature/Registered Agent

8/7/13  
 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.*

[Signature]  
 Required Signature/Incorporator

8/7/13  
 Date

13 AUG 13 PM 3:00  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS