

PI3000095258

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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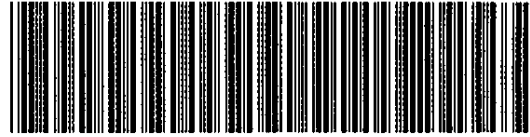
(Business Entity Name)

(Document Number)

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COVER LETTER

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

SUBJECT: PRODECOM INTERNATIONAL USA CORPORATION.
(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: GABRIEL S. DIAZ-SARMIENTO, CPA
Name (Printed or typed)

5600 SW 135 AV. SUITE 202A
Address

MIAMI, FL 33183.
City, State & Zip

(305) 386-0568.
Daytime Telephone number

GABRIEL@GABRIELDIAZCPA.COM.
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 30, 2013

GABRIEL S. DIAZ-SARMIENTO, CPA
5600 SW 135 AVE., SUITE 202A
MIAMI, FL 33183

SUBJECT: PRODECOM INTERNATIONAL CORPORATION
Ref. Number: W13000060438

We have received your document for PRODECOM INTERNATIONAL CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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.

Maryanne Dickey
Regulatory Specialist II
New Filing Section

Letter Number: 113A00025322

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: PRODECOM INTERNATIONAL USA CORPORATION.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1400 NW 96 AV
SUITE 201
MIAMI, FL 33172

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STATE
MIAMI
FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL PURPOSSES.

ARTICLE IV SHARES

The number of shares of stock is: 1000.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LUIS FABIAN BERRERA P.S.D. Name and Title: _____

Address 1400 NW 96 AV Address: _____
SUITE 201
MIAMI, FL 33172

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

(cont.)

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: 65DS REGISTERED AGENTS INC
Address: 5600 SW 135 AV. SUITE 202-A
MIAMI, FL 33183.

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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

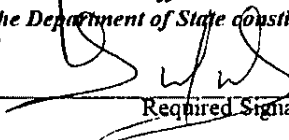
Name: LUIS FABIAN BUCENA
Address: 1400 NW 96 AV. SUITE 201
MIAMI, FL 33172.

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


Required Signature/Registered Agent

10/24/13.
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.


Required Signature/Incorporator

10/24/13.
Date