Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number: I20000000019 Phone : (305)552-5973

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Email	Address	:	 	 	

FLORIDA PROFIT/NON PROFIT CORPORATION FRM CONTRATO INC

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

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Help

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

ARTICLE I NAME: The name of the corporation is:
FRM Contrato Inc
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
104 25 SW 95 AVE
MIAMI FL 33157
ARTICLE III SHARES; The number of shares of stock is: 100
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
FIGEL Remon (P)
To the state of th
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
Fidel Kemon
164 25 SW 95 Ave
MIAMI FL 33157
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
Fidel Remon
104 25 SW 95 Ave
MIAMI FL 33157

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