

P16000002372

Division of Corporations

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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : CORP USA
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
PONCIANA FLORIDA INC

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

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME
The name of the corporation shall be: PONCIANA FLORIDA INC

ARTICLE II PRINCIPAL OFFICE
Principal street address: 1985 NW 88TH CT. SUITE 101
DORAL FLORIDA 33172
Mailing address, if different is: _____

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: ALL LAWFUL BUSINESS

ARTICLE IV SHARES
The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JALIL MARDINI FARAH P Name and Title: _____
Address: 1985 NW 88TH CT SUITE 101 Address: _____
DORAL FL 33172 _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

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Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: MARIANO J. RODRIGUEZ

Address: 1985 NW 88TH CT SUITE 101

DORAL FL 33172

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MARIANO J. RODRIGUEZ

Address: 1985 NW 88TH CT. SUITE 101

DORAL FL 33172

ARTICLE VIII EFFECTIVE DATE: 01/08/2016

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

_____ 01/08/16

Required Signature/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.

_____ _____

Required Signature/Incorporator Date

01/10/2016 22:31 3056399696