## P17000026182

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	<del>:</del> #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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SECKETANT OF STATE
AND SEFF. FLORIDA

~ 03/23/17

## **COVER LETTER**

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

SUBJECT:	QUE.	Investme.	its,,Lnc.
•	(RROPOSED CORPORA	ATE NAMÉ – <u>MUST INCL</u> I	<u>UDE SUFFIX</u> )
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	l a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate of Status
		ADDITIONAL CO	
FROM:	Ryan Van Nam 9535 SW	Printed or typed)  Address	
	Mlami Gity	_L 33165 , State & Zip	
	(305) 90 Baytime	X-C368 Telephone number	
	E-mail aduress: (to be use	997 @ gmai'. ed for future annual report i	COm 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:	20E	Investr	nents, J	Tnc	
ARTICLE II PRINCIPAL OFFICE Principal street addr	ess	M	ailing address, if c	lifferent is:	
9535 SW 39 S		95.	35 SW 3 3ml, FC	395	-
Mami, FC 33169	<u> </u>	Mla	ami, FC	33105	<u>-</u>
ARTICLE III PURPOSE  The purpose for which the corporation is org	anized is: Who	olesale,	sell p	ropert	у
The purpose for which the corporation is org	e pair, h	ent, in	vest, e	fc. 1.	<i></i>
				FALL	1
				AHAS AS	MAR 2
				SE OF	71 PM
ARTICLE IV SHARES The number of shares of stock is:	3 (200)			SIAIE	3: 00
The number of shares of stock is:	7,000				
ARTICLE V INITIAL OFFICERS AND	1.1		٨		
Name and Title: <u>Hyan</u> Address Pre Side	Jalle -	_ Name and Title:_	$-$ /\	$\overline{/}$	
	sw 39 st	Address: _	-/X		
	-C3396	 		<del></del>	
Name and Title:		_ Name and Title:_	/	<u>,                                     </u>	
Address	/	Address:	-/		
	$\overline{}$				
Name and Title:		Name and Title:_	-	/	
Address		_ Address: _	1		

Name and Title:  Address	Name and Title:  Address:
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT accept Name:  Address:  Manl, FC 3316	TALLAHASSEE.
The name and address of the Incorporator is:  Name:  Address:  Address:  Address:  M(ami, FL 33)	PH 3: 00  E. FLORIDA  ST  GS
filing.)	. (OPTIONAL) d cannot be more than five days prior or 90 days after the blicable statutory filing requirements, this date will not be listed as ecords.
this certificate, I am familiar with and accept the appointme	3/19/17 ent Date
document to the Department of State constitutes a third degree Required Signature/Incorporator	rein are true. I am aware that the false information submitted in a ree felony as provided for in s.817.155, F.S.  Date