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

Fax Number : (305)675-5944

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

Address	
	Address:

FLORIDA PROFIT/NON PROFIT CORPORATION ROMOR USA, CORP

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

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Help

ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

POMOR USA, COrp
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address in:
3915 NW 25TH STREET
3915 NW 25TH STREET MIAMI, FC 33142
ARTICLE III SHARES: The number of shares of stock is: 1,000
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
Mainie Medina (P)
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
3925 NW 28 TH STREET WAM' FT. 33142 HAIN'E MEDINA
1/11/2 - 10-01
MATNIE WEDINA
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
- MAINIE MEDINA
MAINIE MEDINA 3925 NW 25TH STREET MIANNI, FL. 33142
MANY, FL. 33142

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.\$47.155, F.S.

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