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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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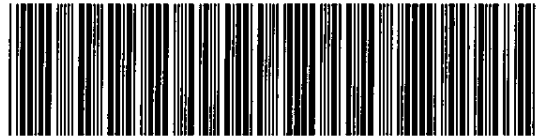
(Business Entity Name)

(Document Number)

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09 JAN 30 PM 1:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVE  
AND  
FILED

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12711

**COVER LETTER**

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

SUBJECT: FAFIDES INC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

**ADDITIONAL COPY REQUIRED**

FROM: DICK ARIAS  
Name (Printed or typed)

1047 SW 122 AV.  
Address

PEMBROKE PINES FL. 33025  
City, State & Zip

305 9847257  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 12, 2009

DICK ARIAS  
1047 SW 122 AVE  
PEMBROKE PINES, FL 33025

SUBJECT: FAFIDES INC  
Ref. Number: W09000001374

We have received your document for FAFIDES INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

~~The new jurisdiction of incorporation must be contained in the document.~~

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) 245-6962.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 209A00001036

APPROVE  
AND  
FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION  
FOR

The undersigned, acting as Incorporator(s) of a corporation pursuant to chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation:

ARTICLE I NAME:

The name of the corporation shall be:

FunCorpus INC.

ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

The principal and mailing address of this corporation is:

1047 SW. 122 AV. Pembroke pines  
FL. 33025

ARTICLE III PURPOSE (S)

The specific purpose(s) for which the corporation is organized is (are):

The creation and support of IMIGRAN FAMILY

ARTICLE IV MANNER OF ELECTIONS OF DIRECTORS:

The manner in which the directors are elected or appointed is as follows:

By The by laws

#### ARTICLE V LIMITATION OF CORPORATE POWERS

The corporate powers of this corporation are as provided the section 617.0302, Florida Statutes, unless limited as follows:

#### ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

Dick R. Arias, 1047 SW 122 AV Pembroke Pines  
FL. 33025

#### ARTICLE VII DIRECTORS (must have the minimum of three directors): NAME AND ADDRESS

DICK R. Arias -- President.  
Arturo Silva -- Vicepresident.  
Ricardo Medina -- Secretary.  
Johanna X. Mendez -- Treasurer.

#### ARTICLE VIII INCORPORATOR

The name and street address of the incorporator for these Article of Incorporator is:

Dick R. Arias, 1047 SW 122 AV Pembroke Pines  
FL. 33025

The undersigned incorporator has executed these Articles of Incorporation this 27 day of January, 2009

  
Signature

APPROVE  
AND  
FILED

09 JAN 30 PM 1:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE  
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF  
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE  
REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the corporation is:

FunCorpus INC.

(must include suffix)

The name and address of the registered agent and office is:

Dick R. Arias

(name)


1047 SW 122 AV

(P.O. Box or Mail Drop Box NOT Acceptable)

Pembroke Pines FL 33025

(City/State/Zip)

Having been named as registered agent and to accept service of process for the above  
stated corporation at the place designated in this certificate, I hereby accept the  
appointment as registered agent and agree to act in this capacity. I further agree to comply  
with the provisions of all statutes relating to the proper and complete performance of  
my duties, and I am familiar with and accept the obligations of my position as registered  
agent.

  
Signature of Registered Agent

01-27-09

Date