

WIS0000 10837

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

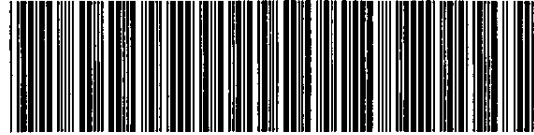
per conversation with Mr. [unclear]
on 11/5/15 add S, and UP

Office Use Only

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 29, 2015

TERESITA R. MARCECA
1565 NE 118TH TER
MIAMI, FL 33161

SUBJECT: NAPLES 2017 CORP.
Ref. Number: W15000071698

We have received your document for NAPLES 2017 CORP. 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 title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://www.sunbiz.org/titledef.html>.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 515A00022922

COPY

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: NAPLES 2017 CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1565 ne 118 th ter Maimi FL 33161

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real Estate Business, Sales Buying and Rents

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Teresita R. Marceca, President

Address 1565 ne 118 th Ter
Miami, Florida 33161

Name and Title: Pablo H. Tivle **VP**

Address: Septiembre 100 UF 130
Belen de Escobar
Prov. of Buenos Aires, Argentina

Name and Title: Laura Ferrua **S**

Address Septiembre 100 UF 130
Belen de Escobar
Prov. of Buenos Aires, Argentina

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Teresita R. Marceca

Address: 1565 ne 118 Th Ter, Miami FL 33161

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Teresita R. Marceca

Address: 1565 ne 118 Th Ter, Miami FL 33161

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: OCTOBER 26 2015. (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




Required Signature/Registered Agent

October 19 2015

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

October 19Th 2015

Date