

P00000095324

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

SUBJECT:

Eloki, Incorporated

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

700003419817--9
-10/09/00--01106--023
*****87.50 *****87.50

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 of
Status

ADDITIONAL COPY REQUIRED

FROM:

Maribel Ramirez

Name (Printed or typed)

3300 Biscayne Boulevard, #F-1

Address

Miami, FL 33137

City, State & Zip

305-573-8886

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FL 32314

00 OCT -9 AM 10:13

FILED

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

10-10
WC

Articles of Incorporation

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

Article I Name

The name of the corporation shall be:

Elokí, Incorporated

Article II Principal Office

The principal place of business and mailing address of this corporation shall be:

**3300 Biscayne Boulevard, F-1
Miami, FL 33137**

Article III Shares

The number of shares of stock that this corporation is authorized to have outstanding at any one time are:

1,000,000 shares

Article IV Initial Registered Agent and Street Address

The name and Florida Street Address of the initial registered agent are:

**Maribel Ramirez
3300 Biscayne Boulevard, F-1
Miami, FL 33137**

FILED
00 OCT -9 AM 10:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Article V Incorporator

The incorporator is:

Maribel Ramirez



Signature/Incorporator

10-02-00

Date

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/Registered Agent

10-02-00

Date