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Florida Department of State  
Division of Corporations  
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Katherine Harris, Secretary of State

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To: Division of Corporations  
Fax Number : (850)922-4001

From: Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305)599-0839  
Fax Number : (305)716-0346

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DIVISION OF CORPORATIONS  
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**FLORIDA PROFIT CORPORATION OR P.A.**

**MOGABIER, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

**ARTICLES OF INCORPORATION**  
**MOGABIER, INC**

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation act, hereby adopt (s) the following Articles of Incorporation.

**ARTICLE I**

The name of the corporation might be: **MOGABIER, INC.**

**ARTICLE II PRINCIPAL OFFICE**

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

**919 PLACETAS AVENUE**  
**CORAL GABLE, FL 33146**

**ARTICLE III SHARES**

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

One Thousand shares of common, voting stock  
(\$1.00) par value

**ARTICLE IV INITIAL REGISTERED AGENT AND  
STREET ADDRESS**

The name and address of the initial registered agent is:

**Diego E. Cordova**  
**8905 S.W. 87<sup>th</sup> Avenue**  
**Suite 200**  
**Miami, FL 33176**

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## ARTICLE V INCORPORATOR (S)

The name(s) and street address (es) of the incorporator (s) to these articles of Incorporation is (are):

MARTA DEL MONTE  
919 PLACETAS AVENUE  
CORAL GABLES, Florida 33156

## ARTICLE VI DIRECTOR(S)

The name (s) and street address (es) of the Director(s) to these Articles of Incorporation is (are):

MARTA DEL MONTE  
919 PLACETAS AVENUE  
CORAL GABLES, Florida 33156

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 31<sup>ST</sup> day of January, 2001.



Signature

Marta Del Monte

Articles of Incorporation  
Filing Fee - \$35.00

**CERTIFICATE OF DESIGNATION**

**CERTIFICATE OF DESIGNATION  
REISTERD AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501 or 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.

1. The name of the corporation is: MOGABIER, INC.

2. The name and address of the registered agent and office is:  
Diego E. Cordova

(Name)

8905 S.W. 87<sup>th</sup> Avenue  
Suite 200  
Miami, Florida 33176

(Address)

Po box not acceptable

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

Diego E. Cordova

DATE

2/1/01

REGISTERED AGENT FILING FEE; \$35.00

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