

PO1000102456

TRANSMITTAL LETTER

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

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-10/22/01--01063--016
*****87.50 *****87.50

SUBJECT: BRASCOFFEE IMPORTERS Corp.
(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 of
Status

ADDITIONAL COPY REQUIRED

FROM: Mario Braga
Name (Printed or typed)
6600 Kingspointe Pkwy
Address
Orlando, FL
City, State & Zip
407-355-7810
Daytime Telephone number

FILED
01 OCT 22 AM 11:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

13
10/23/01

FILED

ARTICLES OF INCORPORATION

01 OCT 22 AM 11:26

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

BRASCOFFEE IMPORTERS Corp.

ARTICLE II PRINCIPAL OFFICE

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

**6600 KINGSPONTE PKWY
ORLANDO, FL - 32819**

ARTICLE III SHARES

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

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

**MARIO C. BRAGA
3225 ARDEN VILLAS BLVD UNIT # 9
ORLANDO, FL - 32817**

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

**MARIO C. BRAGA
3225 ARDEN VILLAS BLVD UNIT # 9
ORLANDO, FL - 32817**



Signature Incorporator

10/15/01

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

10/15/01

Date