

P81000109229

TRANSMITTAL LETTER

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

900004676619--3
-11/13/01--01055--019
*****78.75 *****78.75

SUBJECT: ROGUE INVESTMENT ENTERPRISE, INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

900004676619--3
-11/13/01--01055--020
*****8.75 *****8.75

Enclosed are 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: TERESA E. CARDOSO
AURELIO J. CASANAS
Name (Printed or typed)

733 SW 4TH STREET
Address

HALLANDALE, FLORIDA 33009
City, State & Zip

(305) 519-3285
Daytime Telephone number

FILED
01 NOV 13 AM 10:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

11-14-01
100

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:

ROGUE INVESTMENT ENTERPRISE, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

733 SW 4TH STREET
HALLANDALE, FLORIDA 33009

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to conduct any and all lawful business

ARTICLE IV SHARES

The number of shares of stock is:

50 - TERESA E. CARDOSO
50 - AURELIO J. CASANAS

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

TERESA E. CARDOSO
733 SW 4TH STREET
HALLANDALE, FLORIDA 33009

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

→ SAME

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

AURELIO J. CASANAS
733 SW 4TH STREET
HALLANDALE, FLORIDA 33009

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

Signature/Registered Agent

Date

Signature/Incorporator

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA