

PO 2000017656

TRANSMITTAL LETTER

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

SUBJECT: CARM PRODUCTS, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

200004793902--8

-01/24/02--01027--000

Enclosed are an original and one (1) copy of the articles of incorporation and a check for \*\*\*\*\*78.75 \*\*\*\*\*78.75

☐ \$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: MILCA MALARY

Name (Printed or typed)

16064 SW 112 TERRACE

Address

MIAMI, FLORIDA 33196

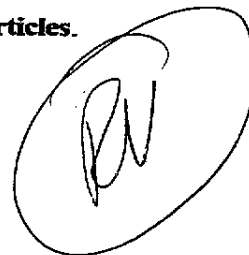
City, State & Zip

305-595-6738 WORK NUMBER

Daytime Telephone number

FILED  
02 JAN 24 PM 2:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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



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## 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:

CARM PRODUCTS, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

16064 SW 112 TERRACE, MIAMI, FLORIDA 33196

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FOR PROFIT - SELLING TO THE PUBLIC

### ARTICLE IV SHARES

The number of shares of stock is:

100Z

### ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

MILCA MALARY - Pres  
16064 SW 112 TERRACE  
MIAMI, FLORIDA 33196

### ARTICLE VI REGISTERED AGENT

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

MILCA MALARY  
16064 SW 112 TERRACE  
MIAMI, FLORIDA 33196

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MILCA MALARY  
16064 SW 112 TERRACE  
MIAMI, FLORIDA 33196

\*\*\*\*\*  
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

2-15-02  
Date

  
Signature/Incorporator

2-15-02  
Date

FILED  
02 JAN 24 PM 2:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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