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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 205-0381

From:

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

**FLORIDA PROFIT CORPORATION OR P.A.**

**LISANA FALCON ENTERPRISES, INC.**

Certificate of Status	0
Certified Copy	1
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## ARTICLES OF INCORPORATION OF

### Lisana Falcon Enterprises, Inc.

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

### ARTICLE I NAME

The name of the Corporation shall Be:  
Lisana Falcon Enterprises, Inc.

The principal place of business of this corporation shall be:  
2716 Ponce De Leon Blvd Coral Gables, FL 33134 Principal Office

### ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

### ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is:  
1000 shares par value

### ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

**ARTICLE V OFFICERS DIRECTORS**

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

Lisana Falcon  
2716 Ponce De Leon Blvd  
Coral Gables, FL 33134

**ARTICLES VI INCORPORATOR (S)**

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

SAME AS ABOVE

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this, 20th day of May 2002.

Signature(s) of Incorporator(s)



Lisana Falcon

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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:

Lisana Falcon Enterprises, Inc..

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

Lisana Falcon

2716 Ponce De Leon Blvd

(P.O. BOX NOT ACCEPTABLE)

Coral Gables, FL 33134

(CITY/STATE/ZIP)

SIGNATURE

TITLE

DATE

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATE CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE

DATE