

P02000124900

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

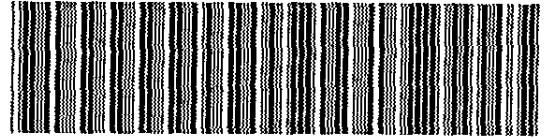
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SEC. OFFICE, FLORIDA
TALLAHASSEE

CB 11-25

TRANSMITTAL LETTER

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

SUBJECT: ALGO- INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: ALFONSO ALBA

Name (Printed or typed)

11935 SW 121TH AV.

Address

MIAMI, FLORIDA 33186

City, State & Zip

305-598-5538

Daytime Telephone number

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

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:

ALGO INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

11935 SW 121 AV.
MIAMI, FLORIDA 33186

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO REPRESENT A CHILDREN AND INFANT WEAR MANUFACTURE FROM COLOMBIA
SA.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

ALFONSO ALBA
11935 SW. 121 AV. MIAMI, FLORIDA 33186
OFFICER
JAIME EDUARDO GOMEZ
12021 SW 97 TERR. MIAMI, FLORIDA 33186

ARTICLE VI REGISTERED AGENT

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

ALFONSO ALBA
11935 SW 121TH AV.
MIAMI, FLORIDA 33186

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JAIME EDUARDO GOMEZ
12021 SW 97 TERR.
MIAMI, FLORIDA 33186

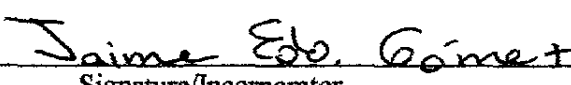
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

11/13/02

Date



Signature/Incorporator

11/13/02

Date

FILED

02 NOV 20 AM 10:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA