

P04000089433

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

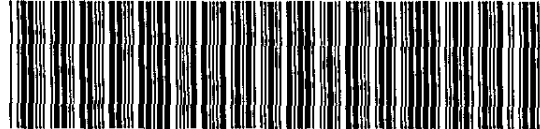
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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06/09/04 0105 014 *\$200.25

04 JUN -9 PM12:55

STATE OF FLORIDA
DIVISION OF REVENUE

RECEIVED

04 JUN -9 AM11:28

STATE OF FLORIDA
DIVISION OF REVENUE
TALLAHASSEE, FLORIDA

EXPRESS CORPORATE FILING SERVICE INC.

Requestor's Name

1000 PONCE DE LEON BLVD. SUITE:101

Address

CORAL GABLES, FL 33134 (305) 444-4994

City/State/Zip

Phone #

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Conrad Bonet Associates Inc.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☒ Pick up time _____ ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

SEP 1 10 11 AM
DIVISION OF CORPORATE REGISTRATION
04 JUN - 9 PM 12:55

Examiner's Initials

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:

CONRAD BONET ASSOCIATES INC.**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

**3375 S.W. 3rd AVE
MIAMI, FLORIDA 33145****ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

INTERIOR DESIGN SERVICES**ARTICLE IV SHARES**

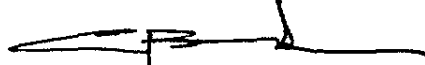
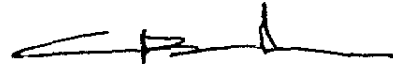
The number of shares of stock is:

100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

**CONRAD BONET / PRESIDENT 4656 N.W. 114 AVE #408
MIAMI, FLORIDA 33178****LEON MAYA / SECRETARY, TREASURER 8100 BYRON AVENUE #201
MIAMI BEACH, FLORIDA 33141****ARTICLE VI REGISTERED AGENT**The name and Florida street address of the registered agent is:**CONRAD BONET
4656 N.W. 114 AVE #408
MIAMI FLORIDA 33178****ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:**CONRAD BONET
4656 NW 114 ave #408
Miami, FLORIDA 33178**

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**06/02/04**
Date
Signature/Incorporator**06/02/04**
Date

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SECRET
DIVISION