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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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FILED

05 JUN -7 AM 9: 44

SECRETANCES CARE

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TRANSMITTAL LETTER

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

SUBJECT: CORPO	OSER AMERICA INC. (PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	Status PY REQUIRED
FROM: AF	RMANDO CHAVARRO		·
	Nam	e (Printed or typed)	
	2555 Porter Lake Dr. Unit 107	Address	
	Sarasota, Florida, 34240	y, State & Zip	
	City	y, State & Lip	
	941-3430013 941-3410000	T	
	Daytime	Telephone number	

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State RECEIVED 05 JUN -7 PM 4: 21

STATE THE TENT OF STATE OF THE TATE OF THE

May 23, 2005

ARMANDO CHAVARRO 2555 PORTER LAKE DR UNIT 107 SARASOTA, FL 34240

SUBJECT: CORPOSER AMERICA INC.

Ref. Number: W05000025803

We have received your document for CORPOSER AMERICA INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Cynthia Blalock Document Specialist New Filings Section

Letter Number: 105A00036975

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

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SECRETARY OF STATE TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

CORPOSER AMERICA INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 2555 Porter Lake Dr. Unit 107, Sarasota Florida, 34240

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Constultant's Offices. Aids and Formation for Human, Familiar, Social and Enterprise the Development Integral. Businesses.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ARMANDO CHAVARRO Director 4546 Linwood, Sarasota Florida, 34232

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

LUIS EDUARDO BARON 2555 Porter Lake Dr. Unit 107, Sarasota Florida, 34240

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ARMANDO CHAVARRO 4546 Linwood, Sarasota Florida, 34232

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

Signature/Incorporator

Date

Mayo 31 2005

Date