

P07000024889

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07 FEB 23 AM 10:27  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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2007 FEB 23 PM 2:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch FEB 26 2007.

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. AMC Export, 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

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:

AMC EXPORT, INC.

## **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

5998 NW 2ND STREET - MIAMI, FL 33126

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

## **ARTICLE IV SHARES**

The number of shares of stock is:

100 SHARES

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

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

JUANA M. CASTELLON - PRESIDENT

5998 NW 2ND STREET - MIAMI, FL 33126

ALDRIN CASTELLON - VICE - PRESIDENT

5998 NW 2ND STREET - MIAMI, FL 33126

## **ARTICLE VI REGISTERED AGENT**

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

JUANA M. CASTELLON

5998 NW 2ND STREET - MIAMI, FL 33126

## **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

ALDRIN CASTELLON & JUANA M. CASTELLON

5998 NW 2ND STREET - MIAMI, FL 33126

\*\*\*\*\*

*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

FEBRUARY 22, 2007

Date

FEBRUARY 22, 2007

Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2007 FEB 23 PM 2:34

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