

P08000067103

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

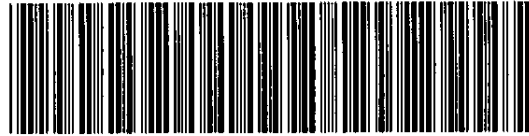
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800132698348

07/15/08--01030--023 **79.00

RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

08 JUL 15 PM 12:15

RECEIVED

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 JUL 15 AM 10:18

5/7/16/08

LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 JUL 15 AM 10:18

Office Use Only

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

1. ABRAHAM'S PROMES CORPORATION
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2.00 ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

☒ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

☐ Annual Report
☐ Fictitious Name

AMENDMENTS

☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

ARTICLES OF INCORPORATION
OF

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 JUL 15 AM 10:18

ABRAHAMS PROMES CORPORATION.

ARTICLE I

THE NAME OF THE CORPORATION IS:

ABRAHAMS PROMES CORPORATION.

ARTICLE II

THE CORPORATION MAY ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND UNDER THE LAWS OF THE STATE OF FLORIDA.

ARTICLE III

THE MAXIMUM NUMBER OF SHARES OF CAPITAL STOCK THAT THE CORPORATION IS AUTHORIZED TO ISSUE IS 500 SHARES AT \$1.00 PER VALUE.

ARTICLE IV

THE AMOUNT OF CAPITAL WITH WHICH THE CORPORATION WILL BEGIN BUSINESS IS THE SUM OF \$500.00

ARTICLE V

THE CORPORATION SHALL HAVE PERPETUAL EXISTENCE UNLESS SOONER DISSOLVED ACCORDING TO LAW, AND ITS EXISTENCE SHALL COMMENCE UPON FILING.

ARTICLE VI

THE STREET ADDRESS IS THE PRINCIPAL OFFICE OF THE CORPORATION IN THIS STATE SHALL BE:

9219 SW 227TH ST # 8
CUTLER BAY FL 33190

ARTICLE VII

THE NAME(S) AND STREET ADDRESS(ES) OF THE PERSON SIGNING THESE ARTICLES ARE:

CESAR CACERES

9219 SW 227TH ST # 8 CUTLER BAY FL 33190

CORALIA ROCHA

9219 SW 227TH ST # 8 CUTLER BAY FL 33190

ARTICLE VIII

THE CORPORATION SHALL HAVE A BOARD OF DIRECTORS CONSISTING OF NOT LESS THAN TWO OR MORE THAN SIX DIRECTORS. THE INITIAL BOARD OF DIRECTORS SHALL CONSIST OF TWO DIRECTORS WHOSE NAME AND ADDRESS ARE AS FOLLOWS:

CESAR CACERES

9219 SW 227TH ST # 8 CUTLER BAY FL 33190

CORALIA ROCHA

9219 SW 227TH ST # 8 CUTLER BAY FL 33190

ARTICLE IX

THE STREET ADDRESS OF THE INITIAL REGISTERED OFFICE, AND THE NAME OF THE INITIAL REGISTERED AGENT AT THAT ADDRESS SHALL BE:

CESAR CACERES

9219 SW 227TH ST # 8 CUTLER BAY FL 33190

THE UNDERSIGNED HAS (HAVE) EXECUTED THESE ARTICLES OF INCORPORATION THIS FOURTEENTH DAY OF JULY OF 2008.

CESAR CACERES:
PRESIDENT


SIGNATURE

CORALIA ROCHA:
VICE PRESIDENT


SIGNATURE

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTER RED OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, 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 is: **ABRAHAMS PROMES CORPORATION**

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

CESAR CACERES

Name:

9219 SW 227TH ST # 8

Address:

Cutler Bay, Florida 33190

City / State / Zip Code

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating the proper and complete performance of my duties, and I am familiar with and accept the obligations, of my position as registered agent.

SIGNATURE: _____

Date: JULY 14, 2008.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JUL 15 AM 10:18