Proposition of the proposition o

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000200083 3)))



H0900020000833ABC/A0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : HUBCO

Account Number : 104662003400 Phone : (516)935-3940

Fax Number : (516) 935-3088

RECEIVED SEP 1 5 2009

FLORIDA PROFIT/NON PROFIT CORPORATION

F&M Enterprize 1 Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sumbiz.org/scripts/efilcovr.exe

9/14/2009

H09000200083

ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

Fatuma Tegegn - President/Director 44009 US 27 Davenport, FL 33897

ARTICLES VI INCORPORATOR(\$)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

Fatuma Tegegn 44009 US 27 Davenport, FL 33897

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

8th day of September 2009.

Fatuma Tegegn - Signature

SIGNATURE

H09000200683

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	r & Ivi Enterprize 1 inc.	·
2. The name and address of the regis	tered agent and office is:	
	Fatuma Tegegn	
	Name	
	44009 US 27	
	(P.O. Box or Mail Drop Box NOT Acceptable)	•
	Davenport, FL 33897	
	(City / State / Zip)	
agent and agree to act in this capa	ed in this certificate, I hereby accept the appointment as regist acity. I further agree to comply with the provisions of all the s te performance of my duties, and am familiar with and accep tered agent.	statutes
	•	 -,
		09 (
		SEP T
		SS
11		
1 W FATILITY	September 8, 2009	
Fatuma Tegegn	(Date)	. 08