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LAZARUS

CORPORATE FILING SERVICE

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MIAMI, FL 33165 (305) 552-5973

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

1. ALFONTECH, INC.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☒ Walk in ☒ Pick up time 2.00 ☒ Certified Copy
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NEW FILINGS

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

AMENDMENTS

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

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
09 OCT -2 PM 4:10
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

September 30, 2009

LAZARUS CORPORATE FILING SERVICE

SUBJECT: ALFONTECH, INC.
Ref. Number: W09000043660

We have received your document for ALFONTECH, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity must be identical throughout the document.

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

The registered agent must sign accepting the designation.

An effective date may be added to the Articles of Incorporation **if a 2010 date is needed**, otherwise the date of receipt will be the file date. **A separate article must be added to the Articles of Incorporation for the effective date.**

Please return the corrected 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) 245-6973.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 509A00031775

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DIVISION OF CORPORATIONS
2009 OCT -2 AM 10:29

ARTICLES OF INCORPORATION

OF

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

2009 OCT -2 AM 10: 29

ALFONTECH, INC.

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: ALFONTECH, INC.

The principal place of business of this corporation shall be:

1115 NW 126 CT., Miami, Fl. 33182

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:

One Hundred shares at \$1.00 each ; Total \$100.00 (One Hundred-00/100 Dollars).

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

Altagracia Elkaiek, President.-1115 NW 126 Ct., Miami, Fl. 33182

Alfonso Eljaiek, Vice President.- 1115 NW 126 Ct., MIami, Fl. 33182

ARTICLE VI INCORPORATOR(S)

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

Altagracia Elkaiek, President.- 1115 NW 126 CT., Miami, Fl.
33182

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 28 day of September, ~~18~~ 2009

Signature(s) of Incorporator(s)

Altagracia Elkaiek
PRESIDENT

STATE OF _____
COUNTY OF _____

THE FOREGOING Instrument was acknowledged and sworn to before me this _____ day of _____, 19__, by _____ (Name of Incorporator)
of _____ (Name of Corporation)

Notary Public

My Commission Expires: _____

CERTIFICATE DESIGNATING
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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

The name of the corporation is: ALFONTECH, INC.

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

ALTAGRACIA ELKAIK

1115 NW 126 CT.

(P. O. BOX NOT ACCEPTABLE)

Miami, Fl. 33182

(CITY/STATE/ZIP)

SIGNATURE *Altagracia Elkai*

(Corporate Officer)

TITLE PRESIDENT

DATE September 28, 2009

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE *Altagracia Elkai*

(Registered Agent)

DATE September 28, 2009

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DIVISION OF CORPORATIONS
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