

P 09000098834

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

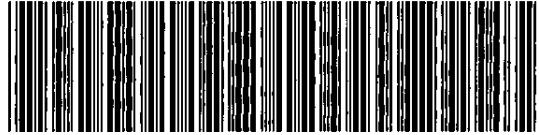
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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J. Shivers DEC 08 2009

✓ Filing Fee \$35.00

✓ Designation of Registered Agent \$35.00

Certified Copy (optional) \$ 8.75 (plus \$1 per page for each page over 8, not to exceed a maximum of \$52.50).

✓ Certificate of Status (optional) \$ 8.75

TOTAL: \$78.75

**Make checks payable to: Florida Department of State**

**Mailing Address: Street Address:**

Department of State Department of State

Division of Corporations Division of Corporations

P.O. Box 6327 Clifton Building

Tallahassee, FL 32314 2661 Executive Center Circle

(850) 245-6052 Tallahassee, FL 32301

(850)

The fee for filing a profit corporation is:

Filing Fee	\$35.00
Designation of Registered Agent	\$35.00
Certified Copy (optional)	\$ 8.75 (plus \$1 per page
Certificate of Status (optional)	\$ 8.75
	<hr/>
	\$78.75

**Make checks payable to: Florida Department of State**

**Mailing Address:**

Department of State

Division of Corporations

**ARTICLES OF INCORPORATION  
OF  
PROVEEDORES, INC.**

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, does hereby adopt the following articles of incorporation:

**ARTICLE I:**

The name of the corporation is: PROVEEDORES, INC.

**ARTICLE II:**

The duration of the corporation is perpetual.

**ARTICLE III:**

The purposes for which the corporation is organized are.

- A. To carry on and transact any lawful business.
- B. To acquire, own, use, convey, and otherwise dispose of and deal in real property, and other personal property or any interest therein.

To enter into any lawful arrangements for sharing profits and losses in any transaction or transactions.

**ARTICLE IV:**

The corporation may issue One Hundred (100) shares of voting common stock of par value **ONE DOLLAR (\$1.00)** each share with preemptive rights preserved.

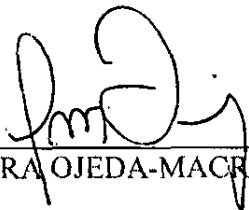
**ARTICLE V:**

The street address of the initial office of the corporation is 9222 Camino Villa Blvd . Tampa, Fl. 33635 and the name of the initial registered agent, is ZOMAIRA OJEDA-MACRINI at 9222 Camino Villa Blvd . Tampa, Fl. 33635. Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete

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TALLAHASSEE, FLORIDA

performance of my duties, and I am familiar with, and accept the obligations of my position as registered agent.

Registered agent's signature:

  
ZOMAIRA OJEDA-MACRINI

ARTICLE VI:

The names and addresses of the initial directors of the corporation are:

ZOMAIRA OJEDA-MACRINI, 9222 Camino Villa Blvd . Tampa, Fl. 33635

ANTONIO MACRINI, 9222 Camino Villa Blvd . Tampa, Fl. 33635

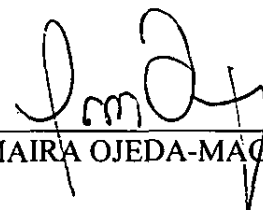
ARTICLE VII:

The names and addresses of the initial officers of the corporation are:

NAME	OFFICER:	ADDRESS
ZOMAIRA OJEDA-MACRINI,	President	9222 Camino Villa Blvd . Tampa, Fl. 33635
ANTONIO MACRINI	Vice-President	9222 Camino Villa Blvd . Tampa, Fl. 33635

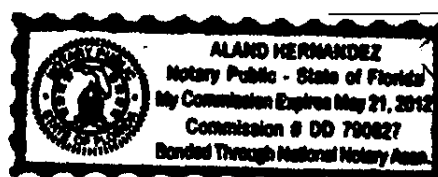
ARTICLE VIII:

The names and address of the incorporators of this corporation ZOMAIRA OJEDA-MACRINI, 9222 Camino Villa Blvd . Tampa, Fl. 33635

  
ZOMAIRA OJEDA-MACRINI

STATE OF FLORIDA  
COUNTY OF

The foregoing instrument was acknowledged before me this 10<sup>th</sup>. day of November, 2009 by ZOMAIRA OJEDA-MACRINI, personally known to me.



Notary Public - State of Florida

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TALLAHASSEE, FLORIDA

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