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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Nov 17 2010
J. Shivers

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: EXIMCA, INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 Filing Fee
☒ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: Esly Williams
Name (Printed or typed)

5785 NW 112 Ter
Address

Hialeah, FL 33012
City, State & Zip

787-399-8709
Daytime Telephone number

chesterwilliams20@hotmail.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME EXIMCA, INC
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
5785 NW 112 Ter
Hialeah, FL 33012

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Importer, exporter and wholesaler of a variety of products.

ARTICLE IV SHARES

The number of shares of stock is: 500 Stocks

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Pedro Salgado, President/Vice-president
Address: 5785 NW 112 Ter
Hialeah, FL 33012

Name and Title: _____
Address: _____

Name and Title: Dina Oseguera, Secretary
Address: 5785 NW 112 Ter
Hialeah, FL 33012

Name and Title: _____
Address: _____

Name and Title: Esly Williams, Director
Address: 5785 NW 112 Ter
Hialeah, FL 33012

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Esly Williams
Address: 5785 NW 112 Ter
Hialeah, FL 33012

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Esly Williams
Address: 5785 NW 112 Ter
Hialeah, FL

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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

Esly Williams
Required Signature/Registered Agent

11/05/2010
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Esly Williams
Required Signature/Incorporator

11/05/2010
Date