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(Requestor's Name)	
(Address)	4001
(Address)	
(City/State/Zip/Phone #)	12/00/
(Business Entity Name)	12/09/
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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COVER LETTER

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

SUBJECT: INVERSIONES CIRAC	COPY C.A CORP
(PROPOSED CORPORA	TE NAME – <u>MÜST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the arti	icles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee. & Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED
FROM: BLAS ENRIQUE CIRA PI	INANGO
Name	e (Printed or typed)
11040 w flagler St.	Address
Miami, FI 33174	
City,	State & Zip
(786)586.7927	
Daytime T	elephone number
E-mail address: (to be used	for future annual report notification)

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

ARTICLES OF INCORPORATION

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

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.)			J.		Frais

ARTICLE I The name of the con	NAME INVERSIONES CIRA		10 DEC -9 AM 10: 12
1	PRINCIPAL OFFICE Principal street address 1040 W Flagler St. iami, FL33174		SECRETARY OF STATE TALLAHASSEF or Tile ORIDA g address, if different ile ORIDA
ARTICLE III P			
IMPORT AND	ich the corporation is organized is: EXPORT AND ANY ALL LAWFU	JL BUSINESS	
ARTICLE IV S			
Name and Titl Address:	INITIAL OFFICERS AND/OR DIRECT le:BLAS E. CIRA PINANGO-P 11040 W Flagler St. Miami, Fl 33174	Name and Title: MAF Address: 3900 MIA	RTIN M. PINANGO-VP O NW 79 AVE STE 640 MI, FL 33166
Name and Titl Address:	e:	Name and Title:Address:	
Name and Titl Address:	e:	Address:	
	REGISTERED AGENT da street address (P.O. Box NOT acceptable BLAS E. CIRA PINANGO 11040 W Flagler St. Miami, Fl 33174	e) of the registered agent is:	1.0
ARTICLE VII I	NCORPORATOR		
The <u>name and addr</u> Name: Address:	ess of the Incorporator is: BLAS F. CIRA PINANGO		
this certificate, I am	l as registered agent to accept service of prof familiar with and accept the appointment as	registered agent and agree t	
x R ps C	Required Signature Registered Agent		x12/7/2010
I submit this docum	ent and affirm that the facts stated herein artment of State constitutes a third degree fe	are true. I am aware that t	he false information submitted in a