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SECRETARY OF STATE OF DIVISION OF CORPORATS A

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## **COVER LETTER**

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

## SUBJECT: Capital International Management Group Inc (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:	
\$70.00 Filing Fee & Certificate of Status	\$78.75  Filing Fee  & Certified Copy  & Certificate of Status  ADDITIONAL COPY REQUIRED	
FROM: Carlos J Zambrano	(Printed or typed)	
5356 SW 140 CT	· ·	SECRETARY OF C
Miami, FL 33175	Address	N OF COF
City,		R FORAT
305-207-8417  Daytime Te	elephone number	RATION.
carlosjz@bellsouth.net E-mail address: (to be used	d 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)

ARTICLE I	NAME Capital International	Management Group	Inc DIVISION OF CORPURATE
The name of the	corporation shall be:	Management Group	2011
ARTICLE II	PRINCIPAL OFFICE		2011 JAN 25 PM 2: 5
	Principal street address	Mailin	ng address, if different is:
	5356 SW 140 CT Miami, FL 33175		
	MIAIII, FL 35173		
4 D. WILLIAM	BVIDDOG B		
ARTICLE III The number for	which the corporation is organized is:		•
Profit	· · · · · · · · · · · · · · · · · · ·		
ARTICLE IV	SHARES pares of stock is:100		
		TODG	
Name and	<u>INITIAL OFFICERS AND/OR DIREC?</u> Title:Carlos J Zambrano  → C E C	Name and Title:	
Address:	Title:Carlos J Zambrano - C E O 5356 SW 140 CT	Address:	
	Miami, FL 33175	<del></del>	
	<u> </u>	<del></del>	
	Title:	Name and Title:	
Address:		Address:	
	Title:		
		Address.	
ARTICLE VI	REGISTERED AGENT		
	lorida street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	Carlos J Zambrano		
Address:	5356 SW 140 CT		
	Miami, FL 33175	<del></del>	
ARTICLE VII	INCORPORATOR .		
	ddress of the Incorporator is:		
Name:	Carlos J Zambrano	•	
Address:	5356 sw 140 CT Miami, FL 33175		
	THE THE STATE OF T		
	med as registered agent to accept service of pr am familiar with and accept the appointment a		
-			
	Required Signature/Registered Agent		1/2-0/11 Date
I submit this do	cument and affirm that the facts stated herein		
	Department of State constitutes a third degree f		
	en la De 1		1/20/11
	Required Signature/Incorporator	<del>//</del>	Date
	redamed piguarate/incorhorator -		Date