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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

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FLORIDA PROFIT/NON PROFIT CORPORATION
INVERSIONES PH09, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
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H 11000182409

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

ARTICLE I NAME **INVERSIONES PH09, INC.**
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address
3001 PONCE DE LEON BLVD.
SUITE 211
CORAL GABLES, FL. 33134

Mailing address, if different is:
3001 PONCE DE LEON BLVD.
SUITE 211
CORAL GABLES, FL. 33134

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
GENERAL PURPOSE

ARTICLE IV SHARES
The number of shares of stock is: **100 SHARES**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>JESUS YUMARES TORO, D-P-S-T</u>	Name and Title: _____
Address: <u>3001 PONCE DE LEON BLVD.</u>	Address: _____
<u>SUITE 211</u>	_____
<u>CORAL GABLES, FL. 33134</u>	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Name: CORPORATE CREATIONS NETWORK, INC.
Address: 11980 PROSPERITY FARMS ROAD #221-E
PALM BEACH GARDENS, FL. 33410

ARTICLE VII INCORPORATOR

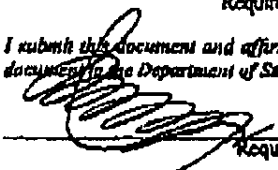
The name and address of the incorporator is:
Name: JESUS YUMARES TORO
Address: 3001 PONCE DE LEON BLVD. SUITE 211
CORAL GABLES, FL. 33134

Having been named as registered agent to accept service of process for the above named 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

 Steven Buchta, Vice President
Required Signature/Registered Agent

07/15/11
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.

 Required Signature/Incorporator

7/15/11
Date

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