

711000671194

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

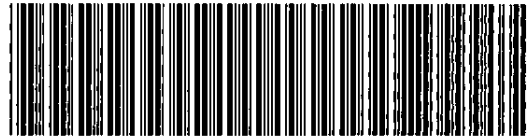
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

FILED

J. Shivers AUG 09 2011

COVER LETTER

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

SUBJECT: **CAFEL COMM 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: **ARTURO CORONEL**

Name (Printed or typed)

2525 NORTH LOOP W STE 400

Address

HOUSTON, TEXAS 77008

City, State & Zip

832-618-1600

Daytime Telephone number

ac@coronelfinancial.com

E-mail address: (to be used for future annual report notification)

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

FILED
24 AUG -8 AM 18:04
TALLAHASSEE, FL 32314

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: **CAFEL COMM INC**

ARTICLE II PRINCIPAL OFFICE

Principal street address
5058 SW 170 AVE
MIRAMAR, FL 33027

Mailing address, if different is:

5058 SW 170 AVE
MIRAMAR, FL 33027

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO CONDUCT ANY LAWFUL BUSINESS ACTIVITY IN COMMERCE AND INTERNATIONAL TRADE IN STATE OF FLORIDA AND ANY OTHER STATE PERMITTED WITHOUT VIOLATING ANY LOCAL, COUNTY, STATE AND FEDERAL LAW.

ARTICLE IV SHARES

The number of shares of stock is: **10,000 (TEN-THOUSAND) SHARES OF COMMON STOCK, NO PAR VALUE**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Carlos Nicolas Caffaro Suarez, Pres**
Address: **Calle Rafael Abreu 254, Los Prados**
Santo Domingo, Dominican Republic

Name and Title: **Heidy Mercedes Feliz de Caffaro, Sec**
Address: **Calle Rafael Abreu 254, Los Prados**
Santo Domingo, Dominican Republic

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

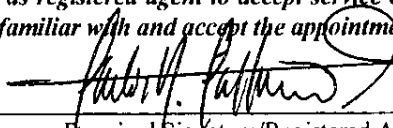
Name: **Carlos Nicolas Caffaro Suarez**
Address: **5058 SW 170 AVE**
MIRAMAR, FL 33027

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **Arturo Coronel**
Address: **2525 N. Loop W. Ste 400**
Houston, Texas 77008

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


Required Signature/Registered Agent

07/27/2011

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

07/27/2011

Date

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MIRAMAR, FL 33027