

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

48008

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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: _____

2011 OCT 13 PM 12:57
RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

FLORIDA PROFIT/NON PROFIT CORPORATION
INVECINE USA, INC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

RECEIVED
11 OCT 13 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

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10/14/11 10/13/11
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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME

INVECINE USA, INC

The name of the corporation shall be:

2011 OCT 13 PM 12:57

ARTICLE II PRINCIPAL OFFICE

Principal street address

2250 SW 3RD AVE

STE 303

MIAMI, FL 33129

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

GENERAL PURPOSE/ EXPORT AND IMPORTS

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: P/S/D

Address:

WILLIAM QUIJANO HIGUERA

2250 SW 3RD AVE, #303

MIAMI, FL 33129

Name and Title:

Address:

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:

JORGE TABARES

Address:

2250 SW 3RD AVE, #303

MIAMI, FL 33129

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name:

JORGE TABARES

Address:

2250 SW 3RD AVE, #303

MIAMI, FL 33129

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

10/13/2011

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

10/13/2011

Date

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