Division of Corporations **Electronic Filing Cover Sheet**

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FLORIDA PROFIT/NON PROFIT CORPORATION FLORMAR CORP.

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Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

Help



ARTICLE OF INCORPORATION

OF

FLORMAN CORP.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME.

The name of the corporation shall be: FLORMAR CORP.

The principal place of business of this corporation shall be:
13290 NW. 43 AVE. UNIT A
OPA LOCKA, PL. 33054

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United State, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: $100 \times $1,000.00$

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE Y OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

SANTA J. IARA 13290 NW. 43 AVE. UNIT A OPA LOCKA, FL. 33054

DIRECTOR

ARTICLE VI INCORPORATOR (5)

The name(s) and street address(es) of the Incorporator(s) to these Article of Incorporation is (are):

SANTA J. LARA 13290 NW. 43 AVE. UNIT AC OPA LOCKA, FL. 33054

PRESIDENT (100 shares)

The undersigned has (have) executed these Article of Incorporation this 29 th. day of October ______, 20 11

Signature/Title

Signature/Title

Signature/Title



CERTIFICATE OF DESIGNATION REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

The name of the corporation is:__

	FLORMAR CORP.
2,	The name and address of the registered agent and office is
	(Name)
	13290 NW. 43 AVE. UNIT A
	(P. O. BOX NOT ACCEPTABLE)
	OPA LOCKA, FLORIDA 33054
	(CITY/STATE/ZIP)
OF PAS R THER RELA AND	NG BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE ROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESI EGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FUR AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES TIME TO THE PROPER AND COMPLETE PERFORMACE OF MY DUTIES I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY TION AS MY POSITION AS REGISTERED AGENT.
	DATE 10-29-11