

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H110002679783)))



H110002679783ABC8

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973

Fax Number : (305)220-1440

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

Email Address:\_\_\_\_

## FLORIDA PROFIT/NON PROFIT CORPORATION ECO GLOBAL DEVELOPMENT GROUP INC

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

RECEIVED
NOVIO PM 3: 55

Electronic l'iling Menu

Corporate Filing Menu

Help

11/10/2011

https://efile.sunbiz.org/scripts/efilcovr.exe

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

	AME	1		= ni0	
The name of the corpo	Marion Strain oc: ECO GLO	BAL DEVE	LOPMENT GF	ROUP INC	
ARTICLE II P.	RINCIPAL OFFICE	:	_		_
450	Principal street address	•	1	Mailing address, if different	is:
	1 WESTON ROAD	<del></del>	****	· · · · · · · · · · · · · · · · · · ·	
<u>SUI</u>	TE 122	<del>- :</del>			<u> </u>
AAES	STON, FL 33331	<del></del>			
ARTICLE III P	TRPOSE				- SE
	ch the corporation is organized	is:			<b>8</b> 0 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
	LAWFÜL BUSINESS				_ ×≥
	•			•	CONT CONT O PI
		•			골
		,			
					<b>7.</b> (2)
ARTICLE IV S	HARES	•	•		ന 🧮
The number of shares		RES			
110 11011000 0. 0. 0. 0.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	NITIAL OFFICERS AND/O		RS		
	RODOLFO M. ESTEFANO/ F			: VIVIEN PEREZ / VICE P	
Address:	4581 WESTON ROAD	<u> </u>	Address:	4581 WESTON ROAD	
	SUITE 122			SUITE 122	
	WESTON, FL 33331	····		WESTON, FL 33331	<del></del> .
Name and Title	e:		Name and Title		
Address:			Address:		
		•	<del></del>		
	e;		Name and Title		
Address:		<del></del>	Address:		
			<del></del>		
			<del></del>		
ARTICLE VI R	EGISTERED AGENT	:			
The name and Flori	da street address (P.O. Box NO	YT acceptable) (	of the registered age	ent is:	
Name:	VIVIEN PEREZ	· · · · · · · · · · · · · · · · · · ·			
Address:	4581 WESTON ROAD, St	UITE 122	_		
	WESTON, FL 33331		<del></del>		
A DANGE IN 1817 - 7	**************************************				
	NCORPORATOR ess of the Incorporator is:				
Name:	VIVIEN PEREZ	•		•	
	4581 WESTON ROAD, S	URTE 122			
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	WESTON, FL 33331				
			_		
	l as registered agent to accept s familiar with and accept the ap				
	in Via			Massacha	- 40, 0044
	ren sux		•		r 10, 2011
	Required Signature/Regis	stered Agent		. E	<b>Xate</b>
I submit this docum	ent and affirm that the facts s	uned berein m	re true. I am awar	e that the false information	n submitted in a
	partment of State constitutes a ti				
				•	
	on tow	:		Novemb	er 10, 2011
	Required Signature/In	corporator	,	442 4 401 0 130	Date