

P1100003775

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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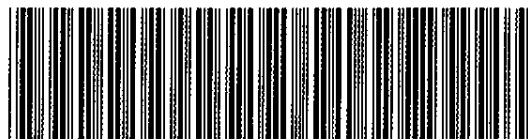
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11 DEC -6 AM 11:33

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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11 DEC -6 AM 8:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
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LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Inversiones Maneton C.A., Inc.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time

2.00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

- ☒ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

ARTICLES OF INCORPORATION

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Inversiones Maneton C.A., Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

18495 S. Dixie Highway #172

Cutler Bay, Florida 33157

Mailing address, if different is:

Same as principal address

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any lawful purpose and business

ARTICLE IV SHARES

The number of shares of stock is: 1000 no par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Maria D. Gonzalez, President

Address: 18495 S. Dixie Highway #172

Cutler Bay, Florida 33157

Name and Title: _____

Address: _____

Name and Title: Marco T. Capriles, Treasurer

Address: 18495 S. Dixie Highway #172

Cutler Bay, Florida 33157

Name and Title: _____

Address: _____

Name and Title: Eduardo Capriles, Secretary

Address: 18495 S. Dixie Highway #172

Cutler Bay, Florida 33157

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: Erwin Diaz-Solis, Esq.

Address: 10661 N. Kendall Drive, Suite 113

Miami, FL 33176

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Erwin Diaz-Solis, Esq.

Address: 10661 N. Kendall Drive, Suite 113

Miami, FL 33176

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

12/02/2011

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

12/02/2011

Date