

AT2000055365

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet 51309

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.

(((H12000162885 3)))



H120001628853ABCO

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 : 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: _____

FLORIDA PROFIT/NON PROFIT CORPORATION RUANAMEL CORP.

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

Electronic Filing Menu

Corporate Filing Menu

Help

12 JUN 19 PM 12:28
RECEIVED
12 JUN 19 PM 2:32
RECEIVED
6/20

H12000162885

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: **RUANAMEL CORP.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
3001 PONCE DE LEON BLVD
SUITE 211
MIAMI, FL 33134

Mailing address, if different is:

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
GENERAL PURPOSE

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	RUBEN SANTIAGO CODA D/P/S/T	Name and Title:	
Address:	3001 PONCE DE LEON BLVD	Address:	
	SUITE 211		
	MIAMI, FL 33134		

Name and Title:		Name and Title:	
Address:		Address:	

Name and Title:		Name and Title:	
Address:		Address:	

12 JUN 18 PM 12:28
RECEIVED
STATE OF FLORIDA
CORPORATION

ARTICLE VI REGISTERED AGENT

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

Name: **CORPORATE CREATIONS NETWORK, INC.**
Address: **11880 PROSPERITY FARMS ROAD #221E**
PALM BEACH GARDENS, FL 33410

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **RUBEN SANTIAGO CODA**
Address: **3001 PONCE DE LEON BLVD SUITE 211**
MIAMI, FL 33134

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

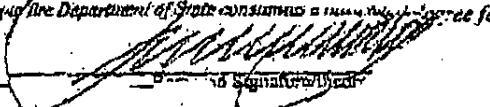


Required Signature/Registered Agent

6/15/12

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 misdemeanor or felony as provided for in s.817.155, F.S.



Signature of Incorporator

6/15/12

Date