

P13000060637

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.

((H13000161939 3)))



H130001619393ABC0

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
IPC & L CORP.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

RECEIVED
13 JUL 19 PM 3:35
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

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

7/22/13

7/19/2013

3

H13000161939

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

13 JUL 19 AM 11:11

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: IPC & L CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1200 BRICKELL AVE.
SUITE 1800
MIAMI, FLORIDA 33131

Mailing address, if different is:
1200 BRICKELL AVE.
SUITE 1800
MIAMI, FLORIDA 33131

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 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CARLOS D'AGUANO - DIR.-PRES
Address: 1200 BRICKELL AVE.
SUITE 1800
MIAMI, FLORIDA 33131

Name and Title: ANGEL AMENDOLA- DIR.SEC.-TREAS.
Address: 1200 BRICKELL AVE.
SUITE 1800
MIAMI, FLORIDA 33131

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

H13000161939

H13000161939

(cont.)

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

ARTICLE VI REGISTERED AGENT

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

Name: SEBASTIAN R. GOLOD
Address: 1200 BRICKELL AVE. SUITE 1800
MIAMI, FLORIDA 33131

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: SEBASTIAN R. GOLOD
Address: 1200 BRICKELL AVE. SUITE 1800
MIAMI, FLORIDA 33131

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

7/19/13

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

7/19/13

Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 JUL 19 AM 11:11

H13000161939
07/19/2013 01:07 30563395696