Florida Department of State
Division of Corporations
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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.

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FLORIDA PROFIT/NON PROFIT CORPORATION
CABE PROJECTS CORPORATION

Certificate of Status	0
Certified Copy	1
Page Count	03
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(3)

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: CABE PROJECTS CORPORATION

ARTICLE II PRINCIPAL OFFICE

Principal street address	Mailing address, if different is:
200 BISCAYNE BLVD. WAY	200 BISCAYNE BLVD. WAY
SUITE 705	SUITE 705
MIAMI, FLORIDA 33131	MIAMI, FLORIDA 33131

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

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DIVISION OF CORPORATIONS

ARTICLE IV SHARES
The number of shares of stock is: 100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ALEXIS S. BEYRUTI - DIR. & PRES.
Address: 200 BISCAYNE BLVD. WAY, SUITE 705, MIAMI, FLORIDA 33131

Name and Title:

Address:

Name and Title: CRISTOPHER R. BEYRUTI-DIR. & SEC.-TREAS.
Address: 200 BISCAYNE BLVD. WAY, SUITE 705, MIAMI, FLORIDA 33131

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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(cont.)

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

_____ _____

_____ _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE VI REGISTERED AGENT

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

Name: INAKI SAIZARBITORIA

Address: 21 S.W. 15 ROAD SUITE 200

MIAMI, FLORIDA 33129

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ALEXIS S. BEYRUTI

Address: 200 BISCAYNE BLVD WAY-SUITE 705

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

_____ 8-5-2013

Required Signature/Registered Agent 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.

Alexis Stephania Beyruti Gonzalez 8-5-2013

Required Signature/Incorporator Date

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