

Division of Corporations

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**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.

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : DORAL NOTARY CORPORATE FILING, INC.
Account Number : I20120000057
Phone : (305) 436-0979
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****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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14 JAN 23 AM 7:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
14 JAN 23 AM 7:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**FLORIDA PROFIT/NON PROFIT CORPORATION
GOODEAL, INC.**

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

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

H140000 17547**ARTICLE I NAME**The name of the corporation shall be: GOODEAL, INC.**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

7145 SW 103 CT CIRMIAMI, FL 33173**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:

ALFREDO GONZALEZ

Name and Title:

Address

7145 SW 103 CT CIR

Address:

MIAMI, FL 33173

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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TALLAHASSEE FLORIDA

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(conti.)

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

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: MALEXYS MORALES
Address: 7145 SW 103 CT CIR
MIAMI, FL 33173

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: MALEXYS MORALES
Address: 7145 SW 103 CT CIR
MIAMI, FL 33173

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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

01/07/2014

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

01/07/2014

Date

H140000 17547