

P-14000080377

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : CORP USA
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (786) 409-5946

****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
ZAYAS FORMALWEAR CORP.**

Certificate of Status	0
Certified Copy	1
Page Count	03
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81724

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Corporate Filing Menu

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14 SEP 29 PM 4:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
9/29/2014

414000228147

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

7

ARTICLE I NAME
The name of the corporation shall be: ZAYAS FORMALWEAR CORP.

ARTICLE II PRINCIPAL OFFICE
Principal street address

Mailing address, if different is:

990 West 49th Street
Hialeah, FL 33012

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Rent and sale of formal wear.

ARTICLE IV SHARES
The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jose A. Zayas Pres.

Name and Title: _____

Address: 990 West 49th Street

Address: _____

Hialeah, FL 33012

Name and Title: Sara Diaz V/P

Name and Title: _____

Address: 990 West 49th Street

Address: _____

Hialeah, FL 33012

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

SEP 23 PM 1:35

(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: Jose A. Zayas
Address: 990 West 49th Street
Hialeah, Fl. 33012

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jose A. Zayas
Address: 990 West 49th Street
Hialeah, Fl. 33012

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

[Signature]
Required Signature/Registered Agent

9/26/2014

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 § 817.135, F.S.

[Signature]
Required Signature/Incorporator

9/26/2014

Date

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[Stamp]