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.

(((H14000254079 3)))



H140002540793ABC%

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

: EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone

: (305)444-4994

Fax Number

: (305)444-4977

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 TAMPA DATA, CORP.

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

Electronic Filing Menu

Corporate Filing Menu

Help

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

RTICLE II PRI	NCIPAL OFFICE		
7000 VAZ VAZA	Principal street address	_	Idress, if different is:
7028 W WATERS AVE TAMPA, FL 33634		7028 W WATERS AVE TAMPA, FL 33634	
RTICLE III PUR	POSE: the corporation is organized is:	ND ALL LAWFUL E	BUSINESS
	7-2/1 <u>0.711-7-2424</u>		
			등 등
		,	30
		The south the same	785 O
		74 - 10	
RTICLE IV SHA	100	***************************************	PN 12: 1
RTICLE IV SHA	IRES 100		P1112: 10
	ARES Stock is: 100	RS	PHIZ: 10
RTICLE V INT	IIAL OFFICERS AND/OR DIRECTO		PHIE TO BRIDA
RTICLE V INT		A Name and Title:	PH D: TO
RTICLE V INT	(P)OSMALDO GOMEZ AGUIL 7028 W WATERS AVE	A Name and Title:	PHIE TO BRIDA
RTICLE V INT	IIAL OFFICERS AND/OR DIRECTO (P)OSMALDO GOMEZ AGUIL	A Name and Title:	PH D: TO
RTICLE V INT	(P)OSMALDO GOMEZ AGUIL 7028 W WATERS AVE	A Name and Title:	PH D: TO
Name and Title Address	(P)OSMALDO GOMEZ AGUIL 7028 W WATERS AVE	A Name and Title: Address:	PHIZ: TO
Name and Title Address Name and Title	(P)OSMALDO GOMEZ AGUIL 7028 W WATERS AVE TAMPA, FL 33634	A Name and Title: Address: Name and Title:	PHIZ: TO
Name and Title Address	(P)OSMALDO GOMEZ AGUIL 7028 W WATERS AVE TAMPA, FL 33634	A Name and Title: Address: Name and Title:	PHIZ: TO
Name and Title Address Name and Title	(P)OSMALDO GOMEZ AGUIL 7028 W WATERS AVE TAMPA, FL 33634	A Name and Title: Address: Name and Title:	PHIZ: TO
Name and Title Address Name and Title	(P)OSMALDO GOMEZ AGUIL 7028 W WATERS AVE TAMPA, FL 33634	A Name and Title: Address: Name and Title:	PHIZ: TO
Name and Title Address Name and Title Address	(P)OSMALDO GOMEZ AGUIL 7028 W WATERS AVE TAMPA, FL 33634	A Name and Title: Address: Name and Title: Address:	PH 12: 10
Name and Title Address Name and Title Address	(P)OSMALDO GOMEZ AGUIL 7028 W WATERS AVE TAMPA, FL 33634	A Name and Title: Address: Name and Title: Address: Name and Title: Name and Title:	PH 12: 10

Date

Name a	and Title:	Name and Title:	
Addres		Address:	
		<u> </u>	
LRTICLE VI	REGISTERED AGENT		
he <u>name and l</u>	Florida street address (P.O. Box NOT acceptable) o	f the registered agent is:	3 0 2
Yame:	OSMALDO GOMEZ AGUILA	_	TALLY OCT
Address:	7028 W WATERS AVE		part of the state
	TAMPA, FL 33634	_	30 F
		-	PH E
RTICLE VII	INCORPORATOR		سسد المراجع المراجع
he <u>name and a</u>	address of the Incorporator is:		
Name:	OSMALDO GOMEZ AGUILA	_	-
Address:	7028 W WATERS AVE	_	
	TAMPA, FL 33634	•	
	med as registered agent to accept service of process		
is ceruficate, i	am familiar with and accept the appointment as res	ristered agent and agree to	act in this capacity
Q /10			OCTOBER 30, 2014
• ,	Required Signature/Registered Agent		Date

Required Signature/Incorporator