

P14000094810

Division of Corporations
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.

(((H14000273353 3)))



H140002733533ABC

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 : CORP USA
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

FILED
14 NOV 24 PM 12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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
ENTHECA GROUP, CORP.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

84969

RECEIVED
14 NOV 24 PM 4:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

NOV 24 2014

G. McLEOD

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

11/24/2014

7

414000273353

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: ENTHECA GROUP, CORP.

ARTICLE II PRINCIPAL OFFICE
Principal street address

9250 W. Bay Harbor Dr # 7D
Bay Harbor Islands FL 33154

Mailing address, if different is:

9250 W. Bay Harbor Dr # 7D
Bay Harbor Islands FL 33154

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any Legal Business / Activity
Permitted in the State of Florida

ARTICLE IV SHARES
The number of shares of stock is: 100 (one hundred)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Guillermo E. GALLO (P)
Address: 9250 W. Bay Harbor Dr Apt 7D
Bay Harbor Islands FL 33154

Name and Title: _____
Address: _____

Name and Title: Mario E. OCHOA (VP)
Address: 9250 W. Bay Harbor Dr Apt 7D
Bay Harbor Islands FL 33154

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

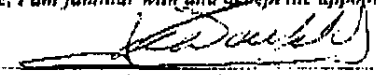
ARTICLE VI. REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Jose L. WAINFELD MARTINEZ
 Address: 9250 W. Bay Harbor Dr Apt 7D
Bay Harbor Islands FL 33154

ARTICLE VII. INCORPORATORThe name and address of the Incorporator is:

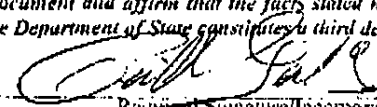
Name: Gulllermo E. GALLO
 Address: 9250 W. Bay Harbor Dr # 7D
Bay Harbor Islands FL33154

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

11-31-14
 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

11/21/2014
 Date

41400273353