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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number: I20000000019

: (305)552-5973

Phone Fax Number

: (305)675-5<del>944</del>

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Fmail Address:			

## FLORIDA PROFIT/NON PROFIT CORPORATION **BENORT INC**

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

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Corporate Filing Menu

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ARTICLES OF INCORPORATION

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

, Pr	ĺ
ARTICLE I NAME: The name of the corporation is:	
BENORT INC	
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:  9171 Fontainebleau Blvd.  Unit #0 Miami FL  33172	٠
ARTICLE III SHARES: The number of shares of stock is:	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS: Ramon Benavides - P MARIANA ORTIZ - VP	
NOV 24 PRI 12: 3	•
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:	
The name and Florida street address (PO Box not acceptable) of the registered agent is:	
Mariana ORTIZ	
9171 Fontainebleau Blud. Unit #60 Miami FL 33172	•
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:  Mariana Ortiz	
9171 Fontainebleau Blvd.	ı
Unit #10 Miami FL 33172	

## Required Signatures:

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

Registered Agent

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.