

P15000006333

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

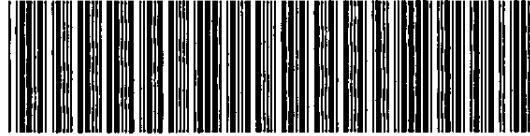
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/20/15--01050--013 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 JAN 20 AM 11:12

APPROVED
AND
FILED

1/6/15

APPROVED
AND
FILED

ARTICLES OF INCORPORATION

15 JAN 20 AM 11:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business
Corporation Act hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

CIMA SOLUTIONS, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

15399 SW 169 LANE

MIAMI, FL 33187

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JOSE ANTONIO GONZALEZ

15399 SW 169 LANE

MIAMI, FL 33187



ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

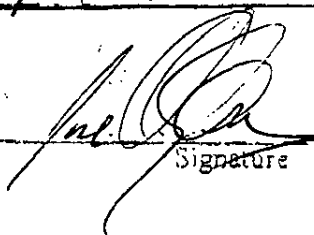
JOSE ANTONIO GONZALEZ (PRESIDENT)

15399 SW. 169 LANE

MIAMI, FL 33187

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

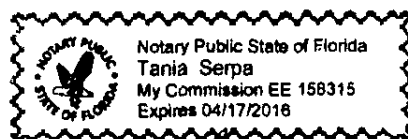
7TH day of JANUARY, 2015


Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.



CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

APPROVED
AND
FILED

15 JAN 20 AM 11:12

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA
FLORIDA, SUBMITS THE FOLLOWING STATEMENT OF DESIGNATING THE REGISTERED
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: CIMA SOLUTIONS, INC

2. The name and address of the registered agent and office is

JOSE ANTONIO GONZALEZ
(NAME)

15399 SW 169 LANE
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

MIAMI FL 33187
(CITY/STATE/ZIP)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

[Signature]
(SIGNATURE)

01/07/15
(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314

