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COVER LETTER

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New Filing Section
Division of Corporations
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Division of Corporations
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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 : (305)633-9696

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

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15 APR -6 PM 5:01

FLORIDA PROFIT/NON PROFIT CORPORATION
BLACK CORAL HOLDINGS, INCORPORATED

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	$78.75

92105

Electronic Filing Menu Corporate Filing Menu Help

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: BLACK CORAL HOLDINGS, INCORPORATED

ARTICLE II PRINCIPAL OFFICE

Principal street address	Mailing address, if different is:
9200 South Dadeland Blvd.	9200 South Dadeland Blvd.
Suite 508	Suite 508
Miami, Florida 33156	Miami, Florida 33156

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: to provide consulting services.

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Edward C. Kulesa (President/CEO)
Address: c/o Fred E. Glickman, P.A.
9200 S. Dadeland Blvd., Suite 508
Miami, Florida 33156

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

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TALLAHASSEE, FLORIDA

(cont'd.)

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: Edward C. Kulesa

Address: 9200 S. Dadeland Blvd., Suite 508

Miami, Florida 33156

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Edward C. Kulesa

Address: 9200 S. Dadeland Blvd., Suite 508

Miami, Florida 33156

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 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.

_____ 4/3/15

Required Signature/Incorporator Date

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