Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone

: (305)552-5973

Fax Number

: (305)675-5944

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

		<u> </u>
Email	Address:	

FLORIDA PROFIT/NON PROFIT CORPORATION RAUL E FADHEL P.A.

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

Electronic Filing Menu

Corporate Filing Menu

Help

	CORPORATION and/or Chapter 621, F.S. (Profit)
,	500 to 1.3
ARTICLE I NAME The name of the corporation shall be: 1990/ E	FAdhel P. LT.
ARTICLE II PRINCIPAL OFFICE Principal street address	Mailing address, if different is:
15792 SW 179 TERR	
11Ami Fla 33193	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	Estate
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<u> </u>	
The same of the sa	The state of the s
ARTICLE IV SHARES The number of shares of stock is:	
The number of shares of stock is: VO	
The number of shares of stock is: VARTICLE V INITIAL OFFICERS AND/OR DIRECT	
The number of shares of stock is:	Name and Title:
Name and Title 157925W 1997EQ	Name and Title:
Name and Title ROULE Fache	Name and Title:
Name and Title 157925W 1997EQ	Name and Title:
Name and Title 187925W 1797EBA Address 157925W 1797EBA JAMES 187925W 1797EBA	P Name and Title: Address:
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FILED

15 APR 13 PM 1 08

Name and Title:	Name and Title:	LEGARIARY OF STATE
Address	Address:	- THE MINISPEE, PEURIDA
7.9 M		
ARTICLE VI REGISTERED AGENT		·
The name and Florida street address (P.O. Box NOT accept	otable) of the registered agent is:	
Name: JOSE E Fadher	<u>/</u>	
Address: 15792 Sw 17972 Finan: F/n 33/9	ERR_	
Tinn: Fla 3319.	3	
ARTICLE VII INCORPORATOR		
The name and address of the Incorporator is:	· •	·
Name: JOSE E FOO		
Address: 15792 SW 17	<u>9 Terr.</u>	
	<u> 83193</u>	
Having been named as registered agent to accept service of	f process for the above stated ca	rporation at the place designated in
this certificate, I am familiar with and acceptable appointme	ens as registerea agent and ugree	
<u> </u>	.,	4-13-15
Required Signature/Registered A	_	Date
I submit this document and affirm that the fagle stated he document to the Department of State constitutes a third deg	rein are true. I am aware that t are felow as provided for in s.8 i	he false information submitted in a 7.155, F.S.
worming in the Department of State Consumpty is that we g	can paramy and processing a constraint	4-12-15
Required Signature/Incorporate	or	Date