

P15000041444

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

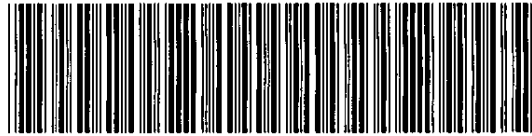
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 10 2015

S. GILBERT

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: RIOS EXPORT AND DISTRIBUTION, INC

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: RIOS EXPORT AND DISTRIBUTION, INC

Name (Printed or typed)

3750 N.W. 114 AVE - SUITE 2.B

Address

DORAL, FL 33178

City, State & Zip

305-713-6027

Daytime Telephone number

ORLANRIOS@GMAIL.COM

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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: RIOS EXPORT AND DISTRIBUTION, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3750 N.W. 114 AVE - SUITE 2.B

DORAL, FL. 33178

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: IMPORT / EXPORT AND DISTRIBUTION

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SIMON ORLANDO RIOS (P.VP,S,T)

Name and Title: _____

Address 3750 N.W. 114 AVE

Address: _____

SUITE 2-B

DORAL, FL. 33178

Name and Title: CESAR ALVAREZ (VP,T)

Name and Title: _____

Address 3750 N.W. 114 AVE

Address: _____

SUITE 2-B

DORAL, FL. 33178

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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TALLAHASSEE, FLORIDA

ORIGINAL

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: CESAR ALVAREZ
Address: 3750 N.W. 114 AVE- SUITE 2.B
DORAL, FL. 33178

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: SIMON ORLANDO RIOS
Address: 3750 N.W. 114 AVE - SUITE 2.B
DORAL, FL. 33178

05/29/2015

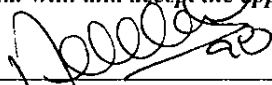
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: MAY.05/2015 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

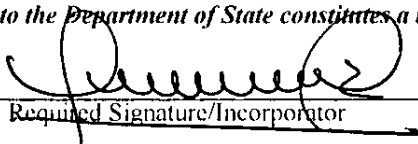
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity:



Required Signature/Registered Agent

05/29/2015
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

05/29/2015
Date