

P15000045640

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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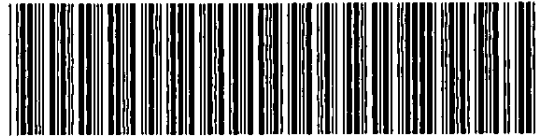
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 MAY 21 PM 2:10

DIVISION OF CORPORATIONS

FILED

15 MAY 21 AM 9:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 6380877 4320744

AUTHORIZATION : *Lydia Cohen*

COST LIMIT : \$ 70.00

ORDER DATE : May 21, 2015

ORDER TIME : 12:24 PM

ORDER NO. : 638087-005

CUSTOMER NO: 4320744

DOMESTIC FILING

NAME: FABERTI US PROPERTIRS INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP
 ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lydia Cohen - EXT. 62974

EXAMINER'S INITIALS: _____

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: Faberti US Properties Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1550 Madruga Ave., Suite #120
Coral Gables, Florida 33146

Mailing address, if different is:
505 Park Avenue 8th Floor
New York, New York 10022

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to engage in any or all lawful business for which corporations may
be incorporated under the provision of the Florida statutes.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Rodrigo Besoy Sánchez ^{Director, President} + Secretary Name and Title: _____

Address Tresalia Capital, SA de C.V. Address: _____

Paseo de Los Tamarindos _____

Col. Bosques de Las Lomas _____

Delegacion Cuajimalpa, C.P. 05120 _____

Mexico, D.F. _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

15 MAY 21 AM 9:12
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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: Corporation Service Company

Address: 1201 Hays Street

Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

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

Name: Yuisa Montanez

Address: 505 Park Avenue 8th Floor

New York, New York 10022

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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.

By: _____

Required Signature/Registered Agent

Robert O'Byrne
Vice President

5/21/15
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

5/21/15

Date