

DISCOUNT

Florida Department of State
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.
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Phone : (305)552-5973
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
GASEMCO ENTERPRISES, INC**

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

15 OCT 26 PM 4:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 OCT 26 AM 3:11

FILED

09/06/2033 05:28
Oct. 26. 2015 9:49AM

#1184 P.002/003
No. 9580 P. 2
H15000255716

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: GASEMCO ENTERPRISES, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address
8501 NW 196 TERRACE
MIAMI, FL 33015

Mailing address, if different is:
8501 NW 196 TERRACE
MIAMI, FL 33015

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: REPAIRS PUMPS GAS STATION

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: RICHARD LARANCUENTE

Address: PRESIDENT

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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No. 9580 P. 3

H150002557 16

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: RICHARD LARANCUENTE
Address: 8501 NW 196TH TERRACE
MIAMI, FL 33015

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: RICHARD LARANCUENTE
Address: 8501 NW 196TH TERRACE
MIAMI, FL 33015

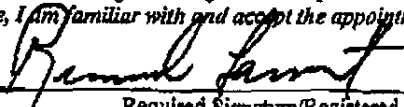
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 10/23/2015 (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

10/23/2015

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

10/23/2015

Date

H150002557 16