

P15000099383

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

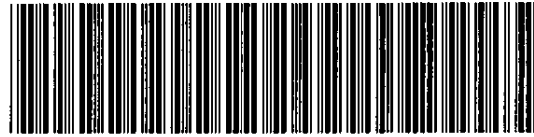
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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15 DEC 16 AM 10:57

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DEC 16 2015

T SCHROEDER



1000 Ponce de Leon Blvd. Suite: 105  
Coral Gables, FL 33134  
Phone: 305-444-4994  
Email: filing@ecfsfiling.com

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

1. Rodelf Corporation  
(CORPORATE NAME) (DOCUMENT #)
2. \_\_\_\_\_  
(CORPORATE NAME) (DOCUMENT #)
3. \_\_\_\_\_  
(CORPORATE NAME) (DOCUMENT #)

☐ Walk-In

☒ Pick up time: \_\_\_\_\_

☒ Certified Copy

☐ Certificate Of Status

| New Filings                         |                   |
|-------------------------------------|-------------------|
| <input checked="" type="checkbox"/> | Profit            |
| <input type="checkbox"/>            | Non-Profit        |
| <input type="checkbox"/>            | Limited Liability |
| <input type="checkbox"/>            | Other:            |

| Amendments               |                        |
|--------------------------|------------------------|
| <input type="checkbox"/> | Amendments             |
| <input type="checkbox"/> | Resignation            |
| <input type="checkbox"/> | Dissolution/Withdrawal |
| <input type="checkbox"/> | Other:                 |

| Other Filings            |                 |
|--------------------------|-----------------|
| <input type="checkbox"/> | Annual Report   |
| <input type="checkbox"/> | Fictitious Name |
| <input type="checkbox"/> | Apostille:      |
| <input type="checkbox"/> | Other:          |

Examiners 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:

RODALE CORPORATION eff: 01/01/16

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

244 BISCAYNE BLVD.  
# 4803  
MIAMI, FL 33132

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

TO CONDUCT ANY LAWFULL BUSINESS IN THE STATE  
OF FLORIDA AND THE UNITED STATES.

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: JEREMIO PINTOS  
Address: 244 BISCAYNE BLVD.  
# 4803  
MIAMI, FL 33132

Name and Title: Pres / Sec.

Name and Title:  
Address:

Name and Title:  
Address:

Name and Title:  
Address:

Name and Title:  
Address:

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: EDWARD JORDAN  
Address: 255 ALDAMBA CIR #500  
CORAL GABLES, FL 33134

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: JEREMIO PINTOS  
Address: 244 BISCAYNE BLVD. # 4803  
MIAMI, FL 33132

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.

Required Signature/Incorporator

Date

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