

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 : TRAMILEX LLC Account Number : 120150000086 Phone : (786)469-9163

Fax Number

: (305)848-3716

**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 GIORGIO & RICO CORP.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

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COVER LETTER

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

SUBJECT: GIORG	IO & RICO CORP.		
3000EC1:	(PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	i 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 CO	PY REQUIRED
FROM: os	CAR RODENA\$	e (Printed or typed)	
· 866	0 W FLAGLER ST STE 207		
		Address	
MI	AMI, FL 33144		
	City	, State & Zip	
(30	5) 848-3716		
	Daytime	Геlephone number	<u> </u>
tran	nilexllc@gmail.com		
	E-mail address: (to be use	ed for future annual report	notification)

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

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ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

me of the corporation shall be: GIORGIO & RICO CORP.	
CLE II PRINCIPAL OFFICE Principal street address	Mailine add 16 deer 1
W Flagler St Ste 207	Mailing address, if different is: SAME ADRESS
II, FL 33144	
· · · · · · · · · · · · · · · · · · ·	
CLE III PURPOSE	
rpose for which the corporation is organized is:	,
AND ALL LAWFUL BUSINESS	
	· · · · · · · · · · · · · · · · · · ·
mber of shares of stock is:	
unber of shares of stock is: CLE V INITIAL OFFICERS AND/OR DIRECTORS	
CLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: OSCAR RODENAS. PRESIDENT	Name and Title:
CLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: 9660 W. EL AGLER ST STE 207	
The v INITIAL OFFICERS AND/OR DIRECTORS Name and Title: 8660 W FLAGLER ST STE 207	Name and Title:
CLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: 8660 W FLAGLER ST STE 207	Name and Title:Address:
CLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: 8660 W FLAGLER ST STE 207	Name and Title:
Name and Title: OSCAR RODENAS. PRESIDENT Address MIAMI, FL 33144	Name and Title:Address:
Name and Title:	Name and Title: Address: Name and Title:
Name and Title: 8660 W FLAGLER ST STE 207 MIAMI, FL 33144	Name and Title: Address: Name and Title:
Name and Title:	Name and Title:Address:
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Name and Title:		Name and Title:	
Address		Address:	· · ·
		<u> </u>	
	•		
	<u>REGISTERED AGENT</u> orida street address (P.O. Box NOT acceptabl	e) of the registered agent is:	
Name:	TRAMILEX LLC	-, 4 Groto	
	8660 W FLAGLER ST STE 207	~	
Address:			
	MIAMI, FL 33144	<u> </u>	•
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>		
The <u>name and ac</u>	ddress of the Incorporator is:		
Name:	ERIK GONZALEZ	_	
Address:	8660 W FLAGLER ST STE 207		
	MIAMI, FL 33144		
			
ARTICLE VIII	EFFECTIVE DATE: 01/01/2016		
Effective date, if	other than the date of filing: 01/01/2016 Late is listed, the date must be specific and cr	(OPTION	
days after the fi		mot be more than dae our	siness days prior or 50 business
Note: If the date	inserted in this block does not meet the applic	able statutory filing requirem	nenrs, this date will not be listed as
	ffective date on the Department of State's reco		
Having been nat this certificate. I	ned as registered agent to accept service of pro am familiar with and accept the appointment a	ocess for the above statea co is registered agent and agree	rporation at the place designated t to act in this capacity
	DOGT.		12/28/2015
	Required Signature/Registered Agent	_	Date
# _ # ***		are true I am aware that	
i submit this do	cument and affirm that the facts stated herein Department of State constitutes a third degree	felony as provided for in s.8)	17.155, F.S.
	ON		12/28/2015
Requ	ired Signature Hicorporator	<u> </u>	Date