

01/06/2016
1/6/2016

P1600000/547

Division of Corporations

PAGE 01

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000003901 3)))



H16000003901 3ABCU

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : CLARA GIRALDO, P.A.
Account Number : I19990000017
Phone : (305)485-9300
Fax Number : (305)485-1098

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 JAN -6 PM 1:08

****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
AFCA PAYMENT CORP.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 JAN -6 PM 12:16

JAN 07 2016

T CANNON

CLARA GIRALDO P.A.
4080 SW 84 AVENUE SUITE C
MIAMI, FL 33155
PH.: (305) 485-9300

Electronic Filing Menu

Corporate Filing Menu

Help

H160000039013

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 JAN -6 PM 1:08

ARTICLES OF INCORPORATION

OF

AFCA PAYMENT CORP.

THE UNDERSIGNED, has executed the following document as incorporator of the above name corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporate, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

ARTICLE I

The name of this corporation shall be:

AFCA PAYMENT CORP.

ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

The general nature of the business and objects and purposed to be Transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

- (1) Transact any and all lawful business.
- (2) Said corporation shall further have powers:
To have perpetual succession by its corporate

name:

AFCA PAYMENT CORP.

ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 50 shares, having an individual par value of \$10.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

CLARA GIRALDO P.A.
4080 SW 14 AVENUE SUITE C
MIAMI, FL 33155
PH.: (305) 486-9300

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H160000039013

16 JAN -6 PM 1:08

ARTICLE V

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

CARMEN FUMERO
1200 BRICKELL AVE, SUITE 1500
MIAMI FL, 33131

The principal office shall be:

CARMEN FUMERO
1200 BRICKELL AVE, SUITE 1500
MIAMI FL, 33131

The Mailing Address shall be:

1200 BRICKELL AVE, SUITE 1500
MIAMI FL, 33131

ARTICLE VI

The initial Board of Directors shall consist of a total of ONE(1) person, and the name and address of the person who is to serve as an initial director is:


CARMEN FUMERO
1200 BRICKELL AVE, STE 1500
MIAMI FL, 33131

PRESIDENT

The name and address of the incorporator executing these Articles of Incorporation

CARMEN FUMERO
1200 BRICKELL AVE, SUITE 1500
MIAMI FL, 33131

IN WITNESS WHEREOF, the undersigned Incorporator has (ve) executed these Articles of Incorporation this January 6, 2016


CARMEN FUMERO

CLARA GIRALDO P.A.
4080 SW 84 AVENUE SUITE C
MIAMI, FL 33155
PH.: (305) 485-9300

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H160000039013

16 JAN -6 PM 1:08

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT / REGISTERED OFFICE**

Pursuant to the provision of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, Submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The Name of the corporation is:

AFCA PAYMENT CORP.

2. The Name and Address of the registered agent and office is:

**CARMEN FUMERO
1200 BRICKELL AVE, SUITE 1500
MIAMI FL, 33131**

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES. AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE



Dated: JANUARY 06, 2016

**CLARA GIRALDO P.A.
4080 SW 84 AVENUE SUITE C
MIAMI, FL 33155
PH.: (305) 485-9300**