

		·
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	
		:





05/10/16--01018--008 **78.75

COVER LETTER

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

SUBJECT: NOMI REAL INVESTMENT CORP.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d a check for:
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED
	MIGUEL FRIS	•	~
	Zlando, Fl	- 3283 ⁻ , State & Zip	}
	407 - 235 Daytime T	-2052 Telephone number	
<u> </u>	Mafriase bel E-mail address: (to be use	Isouth ne	totification)

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

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

	CIPAL OFFICE Principal street address	Mailing address, i	f different is:
	SIERRA VISTA DR.		
ARTICLE III PURP The purpose for which	OSE the corporation is organized is:		
PROFIT.	MBER OF SMALL	L business's	FOR
			5 200 200 200 200 200 200 200 200 200 200
			<u> </u>
ARTICLE IV SHAR The number of shares of	<u>ES</u> f stock is: 1,000,000		HIZ: OR
	AL OFFICERS AND/OR DIRECTORS NOZMA FRANCIS 72: e: TACTUK-FZIAS	SIDEUT Name and Title:	
			
Address	14004 SIERRA VISTA	D.C	
	0121ANDO, FL 328	DRadress:	
	14004 SIERRA VISTA	D&ddress: 37 Name and Title:	
Name and Title Address	14004 SIERRA VISTA 0121ANDD, FL 328: MIGUEL FIZIAS VP	Name and Title: Name and Title:	

Name and	Title:	Name and Title:	
Address		Address:	
ADTICLE VI D	ECIGTEDEN ACENT		
	<u>EGISTERED AGENT</u> rida street address (P.O. Box NOT acco		
Name:	MIGUEL FRIA	S	
Address:	MIGUEL FRIA 14004 SIERRA ORIANDO, FL:	VISTA DR	
	ORIANDO FL:	32837	ನ ಪ್ರ
ARTICLE VII I	NCORPORATOR		5
The <u>name and ad</u>	ress of the Incorporator is:		· •••
Name:	MIGUEL FRIA	<u>S</u>	10 : 21 % de
Address:	MIGUEL FRIA	VISTA DR	73 F
	ORIANDO, FL	3Z837	
ARTICLE VIII	EFFECTIVE DATE:		
Effective date, if o	her than the date of filing:te is listed, the date must be specific as		
days after the fili		ia cannot de more than live dusi	ness days prior or 90 business
Note: If the date i	nserted in this block does not meet the ap	oplicable statutory filing requireme	nts, this date will not be listed a
the document's eff	ective date on the Department of State's	records.	
Having been name	d astregistered agent to accept service of	f process for the above stated corp	ooration at the place designated
this certificate, V an	n familiar with and accept the appointm	ent as registered agent and agree to	act in this capacity
* VV	14h		5-4-16
	Required Signature/Registered A	gent	Date
	nent and affirm that the facts stated he partment of State constitutes a third deg		
locument to Me D	1 1 7	2 V #	
iocument to my P	1114		5-4-16

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