

PI6000043203

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

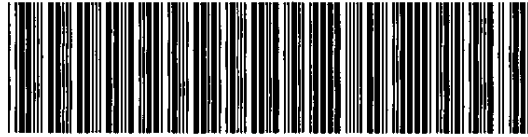
(Document Number)

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16 MAY 17 PM 2:06

SECRETARY OF STATE
TALLAHASSEE, FL 32399

MAY 19 2016

D CUSHING

COVER LETTER

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

SUBJECT: FRÉCOM, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Ernesto Fernandez

Name (Printed or typed)

2102 NW 17 St., Apt D205

Address

MIAMI, FL 33125

City, State & Zip

3056150879

Daytime Telephone number

frecominc@gmail.com ✓

E-mail address: (to be used for future annual report notification)

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

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16 MAY 17 PM 2:06
SECRETARY OF STATE
TALLAHASSEE, FL 32312



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 29, 2016

ERNESTO FERNANDEZ
2102 NW 17 ST., APT D205
MIAMI, FL 33125

SUBJECT: FRECOM, INC.
Ref. Number: W16000006495

We have received your document for FRECOM, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 416A00002005

RECEIVED
16 MAY 17 AM 9:33
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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: FRÉCOM, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2102 NW 17 Street, APT D205,

MIAMI, FL 33125

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Retail Sales

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ERNESTO FERNANDEZ

Name and Title: DIRECTOR

Address 2102 NW 17 ST, AT D205

Address: 2102 NW 17 ST, APT D205

MIAMI, FL 33125

MIAMI, FL 33125

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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16 MAY 17 PM 2:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: MICHEL MARZAN _____

Address: 2138 SW 6 ST, APT 101 _____

MIAMI, FL 33135 _____

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: ERNESTO FERNANDEZ _____

Address: 2102 NW 17 ST, APT D205 _____

MIAMI, FL 33125 _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01/03/2016 (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

01/03/2016
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

01/03/2016
Date