

P16000004879

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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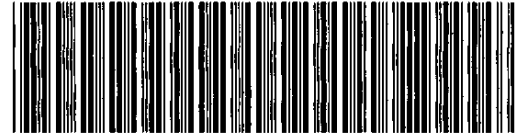
(Business Entity Name)

(Document Number)

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05/31/16--01041--006 **

16 MAY 31 PM 1:08
SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

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

SUBJECT: RIVERO MANAGEMENT ENTERPRISES, 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
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 COPY REQUIRED

FROM: CARLOS RIVERO

Name (Printed or typed)

111 NE 1ST STREET SUITE 908

Address

MIAMI, FL 33132

City, State & Zip

(305) 894-6271

Daytime Telephone number

RIVMANCORP@GMAIL.COM

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

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)

FILED

16 MAY 31 PM 1

ARTICLE I NAME

The name of the corporation shall be: RIVERO MANAGEMENT ENTERPRISES, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

111 NE 1ST STREET

SUITE 908

MIAMI, FL 33132

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to practice any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 1,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CARLOS RIVERO, P

Name and Title: _____

Address 111 NE 1ST STREET

Address: _____

SUITE 908

MIAMI, FL 33132

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

NAME AND TITLE: _____ NAME AND TITLE: _____
ADDRESS _____ ADDRESS: _____

FIL

16 MAY 31

SECRETARY
TALLAHASSEE

ARTICLE VI REGISTERED AGENT

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

NAME: CARLOS RIVERO
ADDRESS: 111 NE 1ST STREET SUITE 908
MIAMI, FL 33132

ARTICLE VII INCORPORATOR

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

NAME: CARLOS RIVERO
ADDRESS: 111 NE 1ST STREET SUITE 908
MIAMI, FL 33132

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 06-01-2016 (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 on 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

06-27-2016
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

06-27-2016
Date