

P/60000 67397

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

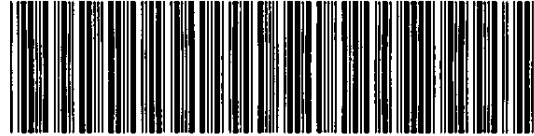
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SEC. CLERK OF STATE  
JUL 16 2016  
16 AUG 11 AM 6:56  
TALLAHASSEE, FLORIDA

*Wm*

## COVER LETTER

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

**SUBJECT:** GlobalWorks of Florida, 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:** Osvaldo Barreto  
\_\_\_\_\_  
Name (Printed or typed)  
  
13310 N. Calusa Club Dr.  
\_\_\_\_\_  
Address  
  
Miami, FL 33186  
\_\_\_\_\_  
City, State & Zip  
  
3059620582  
\_\_\_\_\_  
Daytime Telephone number  
  
obglobal@aol.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

**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)

**ARTICLE I NAME**

The name of the corporation shall be: GlobalWorks of Florida, Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

13310 N. Calusa

Miami, fl. 33186

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Marielena Barreto, President, Secretary

Name and Title:

Address 13310 N. calusa Club dr.

Address:

Miami, fl. 33186

Name and Title: Osvaldo barreto, VP Treasurer

Name and Title:

Address 13310 N. Calusa Club dr.

Address:

Miami, fl. 33186

Name and Title:

Name and Title:

Address

Address:

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: Ozzie Barreto

Address: 13310 N. Calusa Club dr.

Miami, fl. 33186

**ARTICLE VII INCORPORATOR**

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

Name: Ozzie Barreto

Address: 13310 N. Calusa Club dr.

Miami, fl. 33186

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
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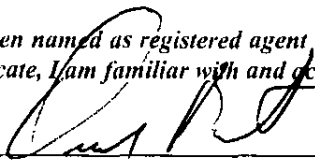
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (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*

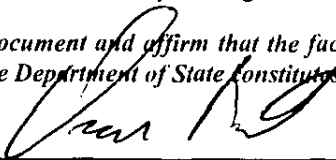


\_\_\_\_\_  
Required Signature/Registered Agent

6/11/16

\_\_\_\_\_  
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

6/11/16

\_\_\_\_\_  
Date