P16000082846

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.

(((H16000252923 3)))

H16000252923ABC/

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 : LAW OFFICES TONY PORNPRINYA
Account Number : I20010000164
Phone : (305)893-8989
Fax Number : (305)891-7717

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

16 OCT 12 PM 4:50

2016 OCT 13 AM 8:43

FLORIDA PROFIT/NON PROFIT CORPORATION
BLACK HOOK INVEST CORP.

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	$78.75

Electronic Filing Menu Corporate Filing Menu Help

N. SAMS

OCT 13 2016

(((H16000252923 3)))

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: Black Hook Invest Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address	Mailing address, if different is:
11624 SW 142 Place	
Miami, FL 33186	

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: ANY AND ALL LAWFUL PURPOSES UNDER FLORIDA LAW

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	Patricio Basualdo, President	Name and Title:	
Address	Los Olmos BP La Celina UF61	Address:	
	Escobar-Buenos Aires, Argentina		
Name and Title:	Natalia Abigail Chine Pinho, Vice Presiden	Name and Title:	
Address	Los Olmos BP La Celina UF61	Address:	
	Escobar-Buenos Aires, Argentina		
Name and Title:		Name and Title:	
Address		Address:	

2016 OCT 13 AM 8:44

(((H16000252923 3)))

(((H16000252923 3)))

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: Juan A. Sanchez, P.A.

Address: 10251 Sunset Dr., #A-106

Miami, FL 33173

2016 OCT 13 AM 8:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: Juan A. Sanchez, Esq.

Address: 10251 Sunset Dr., #A-106

Miami, FL 33173

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

_____ 10/12/16

Required Signature/Registered Agent 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.

_____ 10/12/16

Required Signature/Incorporator Date

(((H16000252923 3)))