

P17000011822

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.

(((H17000035312 3)))



H170000353123ABCW

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 : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
AMAPOLA C. IMPORT INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

17 FEB -6 AM 10:51
SECRETARY OF STATE
ALAHASSEE, FLORIDA

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

FEB 07 2017

K. Brumbley

H17000035512

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I. NAME: The name of the corporation is:Amapola C. Import Inc.**ARTICLE II. PRINCIPAL OFFICE:**

The principal street address and mailing address is:

10970 SW 227th Terrace
Miami FL 33170SECRETARY OF STATE
ALLAHUSSEIN FLORIDA

17 FEB - 6 AM 10:51

FILED

ARTICLE III. SHARES: The number of shares of stock is: 100**ARTICLE IV. INITIAL DIRECTORS AND/OR OFFICERS:**Amapola Micaela Colon (P)**ARTICLE V. INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Amapola Micaela Colon
10970 SW 227th Terrace
Miami FL 33170**ARTICLE VI. INCORPORATOR:** The name and address of the Incorporator is:Amapola Micaela Colon
10970 SW 227th Terrace
Miami FL 33170

H17000035512

H17000035312

Required Signatures:

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

Gonzalo M. Colon 02-06-17
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.

Gonzalo M. Colon 02-06-17
Incorporator Date

H17000035312