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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : FILINGS, INC.
Account Number : 072720000101
Phone : (850) 385-6735
Fax Number : (954) 641-4192

****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
MADIA GROUP, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

M. MOON

MAR 29 2017

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAMEThe name of the corporation shall be: **MADIA GROUP, INC.****ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is: 12286 NW 1st Street, Plantation, FL 33325

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Import and distribute wine from Italy

ARTICLE IV SHARES

The number of shares of stock is: 10.000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

NICOLA COLELLI - Director -

12286 NW 1st Street

Plantation, FL 33325

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

SANTINA PASI

12286 NW 1st Street

Plantation, FL 33325

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

NICOLA COLELLI

12286 NW 1st Street

Plantation, FL 33325

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



Signature/Registered Agent

03/29/2017

Date



Signature/Incorporator

03/29/2017

Date

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