

PR1000028355

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : GOTO ENTERPRISES LLC
Account Number : I20160000055
Phone : (954)369-4444
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DEPARTMENT OF STATE
FALL WASSER FLORIDA

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

Email Address: FABIO@TAXPLACE.COM

FLORIDA PROFIT/NON PROFIT CORPORATION

Oak Invest Group Corp

Certificate of Status	1
Certified Copy	0
Page Count	02
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W 3/30/17

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: **OAK INVEST GROUP CORP**

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1660 W Hillsboro Blvd

Deerfield Beach, FL 33442

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and All Lawful Business

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name	Address	Share
Eduardo H Carnevalheiro da Silva President / Director	Rua David Ben Gurion, 955, torre 2, apt 143 Jd Monte Kemel Sao Paulo/SP 05634-001 Brazil	49%
Art Car Sistemas Automotivos, Servicos e Pecas Ltda (entity) Treasurer	Rua Arnaldo Cintra, 291 Tatuape Sao Paulo/SP 03088-000 Brazil	51%

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ARTICLE VI REGISTERED AGENT

Name	Address
Eduardo H Carvalho da Silva	1660 W Hillsboro Blvd Deerfield Beach, FL 33442

ARTICLE VII INCORPORATOR

Name	Address
Eduardo H Carvalho da Silva	Rua David Ben Gurion, 955, torre 2, apt 143 Jd Monte Kemel Sao Paulo/SP 05634-001 Brazil

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 days prior or 90 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

03/27/2017
Date

1000
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TALLAHASSEE FLORIDA

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

03/27/2017
Date