

PI7000030228

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 : TRAMILEX LLC
Account Number : I20150000086
Phone : (786) 469-9163
Fax Number : (305) 848-3716

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

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FLORIDA PROFIT/NON PROFIT CORPORATION
OREX GLASS CO

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

N. SAMS

APR 05 2017

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CORPORATION SERVICES
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: OREX GLASS CO

(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: Orestes Valdes Pacheco

Name (Printed or typed)

7401 SW 36th St

Address

Miami, FL 33155

City, State & Zip

(305)546-7781

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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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: OREX GLASS CO

ARTICLE II PRINCIPAL OFFICE

Principal street address

7401 SW 36th St

MIAMI, FL 33155

Mailing address, if different is:

SAME ADDRESS

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: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Orestes Valdes Pacheco. P

Address: 7401 SW 36th St

Miami, FL 33155

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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17 APR -5 PM 3:42

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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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: Orestes Valdes Pacheco
Address: 7401 SW 36th St
Miami, FL 33155

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ERIK GONZALEZ
Address: 8660 W FLAGLER ST STE 207
MIAMI, FL 33144

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 04/01/2017 (OPTIONAL)

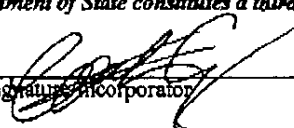
(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

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

 04/01/2017
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.

 04/01/2017
Required Signature/Incorporator Date

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