

**P1700030999**

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 : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.  
Account Number : 075350000353  
Phone : (800)221-2972  
Fax Number : (888)692-9256

**\*\*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**

**Oscar Giraldo Designer Inc**

Certificate of Status	0
Certified Copy	0
Page Count	01
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17 APR -5 PM12:04

URGENT CORPORATE SERVICES

17 APR -5 AM10:54

Electronic Filing Menu

Corporate Filing Menu

Help

M. MOON

APR 05 2017

**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: Oscar Giraldo Designer Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

1551 North Flagler Dr APT 1004

1551 North Flagler Dr APT 1004

West Palm Beach, FL 33401

West Palm Beach, FL 33401

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To conduct all activities set forth and permitted under and Florida corporation law

**ARTICLE IV SHARES**

The number of shares of stock is: 200 NPV

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Oscar Giraldo, DIRECTOR

Name and Title: Edison Mejia, Director

Address: 1551 North Flagler Dr APT 1004

Address: 1551 North Flagler Dr APT 1004

West Palm Beach, FL 33401

West Palm Beach, FL 33401

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

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: Oscar Giraldo  
Address: 1551 North Flagler Dr  
West Palm Beach, FL 33401

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Oscar Giraldo  
Address: 1551 North Flagler Dr  
West Palm Beach, FL 33401

**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*

x Oscar Giraldo  
Required Signature/Registered Agent

4/4/2017  
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.*

x Oscar Giraldo  
Required Signature/Incorporator

4/4/2017  
Date