

PF 1000042158

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 : CORP USA
Account Number : 072450003255
Phone : (305) 634-3694
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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.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
CAPRICHIO CHARTERS, INC.

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

17 MAY 10 PM 4: 52

17 MAY 10 PM 2: 38

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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: CAPRICH0 CHARTERS, INC.

ARTICLE II. PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4851 SW 111TH TERRACE

4851 SW 111TH TERRACE

DAVIE, FL 33328

DAVIE, FL 33328

ARTICLE III. PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS IN THE STATE OF FLORIDA

ARTICLE IV. SHARES

The number of shares of stock is: 100

ARTICLE V. INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ROBERTO FERNANDEZ BLAY, PRES

Name and Title: _____

Address: 4851 SW 111TH TERRACE

Address: _____

DAVIE, FL 33328

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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DAVIE, FL

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: ROBERTO FERNANDEZ BLAY
 Address: 4851 SW 111TH TERRACE
DAVIE, FL 33328

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ROBERTO FERNANDEZ BLAY
 Address: 4851 SW 111TH TERRACE
DAVIE, FL 33328

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 11

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 5/08/17
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.

 Required Signature/Incorporator 5/08/17
Date

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