

OCT/10/2017/TUE 01:24 PM

FAX No.

P. 001

10/10/2017

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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FLORIDA PROFIT/NON PROFIT CORPORATION
CAISSA MANAGEMENT INC

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

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Corporate Filing Menu

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OCT 11 2017

T. SCOTT

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: CAISSA MANAGEMENT INCARTICLE II PRINCIPAL OFFICEPrincipal street address320 SW 136 PLACEMIAMI, FL 33184

Mailing address, if different is:

SAMEARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ANY AND ALL LAWFUL BUSINESSARTICLE IV SHARESThe number of shares of stock is: SHARES: 100ARTICLE V INITIAL OFFICERS AND/OR DIRECTORSName and Title: BLAS J. LUGO (P/D)Address: 320 SW 136 PLACEMIAMI, FL 33184

Name and Title: _____

Address: _____

Name and Title: MAIDELIN R. LUGO (V/D)Address: 320 SW 136 PLACEMIAMI, FL 33184

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

7 OCT 10 AM 9:16
ALL
10/10/2017

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: BLAS J. LUGO
Address: 320 SW 136 PLACE
MIAMI, FL 33184

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

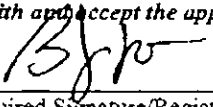
Name: BLAS J. LUGO
Address: 320 SW 136 PLACE
MIAMI, FL 33184

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

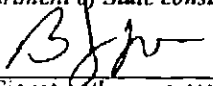


Required Signature/Registered Agent

10-09-17

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

10-09-17

Date