

**P17000296006**

Florida Department of State  
Division of Corporations  
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*2nd  
Request*

\*\*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  
PASTIFICIO COSTA & FANTI CORP**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 1       |
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DIVISION OF CORPORATIONS

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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: PASTIFICIO COSTA & FANTI CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2125 BISCAYNE BOULEVARD 580A  
MIAMI FLORIDA 33137

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO TRANSACT ANY LEGAL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100 OF \$1.00 PAR VALUE EACH

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ANDREA LONGONI Name and Title: PRESIDENT/D

Address: 2125 BISCAYNE BLVD Address:  
580A

MIAMI FLORIDA 33137

Name and Title: SILVIA FANTI Name and Title: TREASURER/SECRETARY

Address: 2125 BISCAYNE BLVD Address:  
580A

Name and Title: MIAMI FLORIDA 33137 Name and Title:

Address:

Address:

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AND  
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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: \_\_\_\_\_ **Ugo V. Chiarato**  
Address: \_\_\_\_\_ **Certified Public Accountant**  
\_\_\_\_\_ **Florida & New York States**  
\_\_\_\_\_ **2125 Biscayne Boulevard - Suite 580 A**  
\_\_\_\_\_ **Miami, Florida 33137**

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

Name: **EMANUELE COSTA**  
Address: **2125 BISCAYNE BLVD 580A**  
**MIAMI FLORIDA 33137**

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: **DECEMBER 1, 2017** (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*

*Ugo V. Chiarato*  
Required Signature/Registered Agent

**Nov 29, 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.*

*Emanuele Costa*  
Required Signature/Incorporator

**Nov 29, 2017**  
Date