Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000011010 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

Phone : (305)552-5973

Fax Number

: (305)675-5944

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

DUCENT 200 INC.

0
1
03
\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

D O'KEEFE

JAN 10 2018

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (F

•	
	ARTICLE I NAME: The name of the corporation is:
· . ·	DUCENT 200 INC.
	ARTICLE II PRINCIPAL OFFICE:
	The principal street address and mailing address is:
	8275 Sw 172 Av, # 1114
	Mion #c. 33196
٠	
d	ARTICLE III SHARES: The number of shares of stock is:
•	
	ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
	PATACL ELIAS URDANETA TORNES
	ANDRES LIGUEL SALAZOR GONEZ
)	EVANDRO ANJONIO DI MATTE O D'ANC CO
	· · · · · · · · · · · · · · · · · · ·
	1
:	ARTICI R V INITIAL DECISTEDED ACENT AND SUBJECT AND DESIGN
:	ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (BO Box not accountable) of the second state of the sec
: · 'ງ	The name and Florida street address (PO Box not acceptable) of the registered agent is:
	The name and Florida street address (PO Box not acceptable) of the registered agent is:
. "]	The name and Florida street address (PO Box not acceptable) of the registered agent is: AWDRES CARREDO 8901 CW 157 AV, # 16-145
. "]	The name and Florida street address (PO Box not acceptable) of the registered agent is:
. ']	The name and Florida street address (PO Box not acceptable) of the registered agent is: AWDRES CARAENO 8901 CW 157 AV # 16-145 WAMI # 33196
	The name and Florida street address (PO Box not acceptable) of the registered agent is: ANDRES CARREDO 8901 CN 157 AV. # 16-145 WAMI AT 33196 ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
	The name and Florida street address (PO Box not acceptable) of the registered agent is: AWDRES CARREDO 8901 CW 157 AV, # 16-145 WAMI A 33196 ARTICLEVI INCORPORATOR: The name and address of the Incorporator is: Andres Carreno
	The name and Florida street address (PO Box not acceptable) of the registered agent is: AWDWES CARREDO 8901 CW 157 AV, # 16-145 WAMI AT 33196 ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Date:

Required Signatures:

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

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 5.817.155, F.S.

Incorporator

*H18000011010+