Florida Department of State **Division of Corporations**

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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 Fax Number : (800)221-2972 : (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.

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FLORIDA PROFIT/NON PROFIT CORPORATION COLAPPAREL INC

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Corporate Filing Menu

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D O'KEEFE

ARTICLES OF INCORPORATION

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

11 North Flagler Drive Apt 1004 1551 North Fl		ing address, if different is:			
		1551 North F	1551 North Flagler Drive Apt 1004		
		West Palm Beach Florida 33401			
CLE III PURP urpose for which	OSE the corporation is organized is:				
gage in any lawf	ul act or activity for which corporations		1		
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mber of shares of	stock is:	Name and Title:			
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mber of shares of LE V INITIA Name and Title	L OFFICERS AND/OR DIRECTORS OSCAR GIRALDO, Director 1551 North Flagler Drive Apt 1004				
mber of shares of LE V INITIA Name and Title	L OFFICERS AND/OR DIRECTORS OSCAR GIRALDO, Director 1551 North Flagler Drive Apt 1004				
The V INITIAL Name and Title Address	L OFFICERS AND/OR DIRECTORS OSCAR GIRALDO, Director 1551 North Flagler Drive Apt 1004	Address:			
Name and Title Name and Title	Stock is: IL OFFICERS AND/OR DIRECTORS OSCAR GIRALDO, Director 1551 North Flagler Drive Apt 1004 West Palm Beach Florida 33401	Address:			
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Name and Title:		Name and Title:		
Address		Address:		

	REGISTERED AGENT			
Name:	Florida street address (P.O. Box NOT acceptable) OSCAR GIRALDO	of the registered agent is:	1	
Address:	1551 North Flagler Drive Apt 1004	_		
	West Palm Beach Florida 33401	·		
<u>ARTICLE VII</u>	INCORPORATOR			
The name and a	ddress of the Incorporator is:		1 2 2	
Name:	OSCAR GIRALDO	_		
Address:	1551 North Flagler Drive Apt 1004	_	7.3	
	West Palm Beach Florida 33401	_		
Effective date, if If an effective d lays after the fil Note: If the date	EFFECTIVE DATE: other than the date of filing: ate is listed, the date must be specific and cannoting.) inserted in this block does not meet the applicable fective date on the Department of State's records.		1	
laving been namils certificate.	ned as registered agent to accept service of process im familiar with and accept the appointment as reg MONT SUD WEST Required Signature/Registered Agent	for the above stated corpora istered agent and agree to act	tion at the place designated in this capacity O 1 09 18 Drate	
submit this docu ocument to the D	ment and affirm that the facts stated herein are epartment of State constitutes a third degree felon	true. I am aware that the fals y as provided for in s.817.155,	se information submitted in a F.S.	
Require	Wall Maldo Signature Ancorporator	>	01/09/18 Date	