

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet  
**P1800013117**

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To: Division of Corporations  
Fax Number : (850)617-6381

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2018 FEB -8 AM 8:01

**FLORIDA PROFIT/NON PROFIT CORPORATION  
EMPORIO BUSINESS GROUP CORP.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

FEB 09 2018

K. Brumbley

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**COVER LETTER**

Department of State  
New Filing Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**SUBJECT:** EMPORIO BUSINESS GROUP CORP.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee  
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy  
 \$87.50 Filing Fee, Certified Copy & Certificate of Status  
**ADDITIONAL COPY REQUIRED**

**FROM:** SANDY CONESA  
Name (Printed or typed)  
8660 W Flagler St Ste 222  
Address  
Miami Fl 33144  
City, State & Zip  
(305)979-1066  
Daytime Telephone number  
bislay@gmail.com  
E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**

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

ARTICLE I NAME EMPORJO BUSINESS GROUP CORP.  
The name of the corporation shall be: \_\_\_\_\_

ARTICLE II PRINCIPAL OFFICE  
Principal street address: 8660 W FLAGLER ST STE 222  
MIAMI, FL 33144  
Mailing address, if different is: SAME ADDRESS

ARTICLE III PURPOSE  
The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES 100  
The number of shares of stock is: \_\_\_\_\_

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SANDY CONESA, P  
Address: 8660 W FLAGLER ST STE 222  
MIAMI, FL 33144

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

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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: Sandy Conesa  
 Address: 8660 W Flagler St Ste 222  
MIAMI FL 33144

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: ERIK GONZALEZ  
 Address: 8660 W FLAGLER ST STE 207  
MIAMI, FL 33144

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 02/09/2018 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business 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*

+ SANDY CONESA \_\_\_\_\_ 02/09/2018  
 Required Signature/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 s.817.155, F.S.*

\_\_\_\_\_ 02/09/2018  
 Required Signature/Incorporator Date

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