P18000036222

4/20/2018 Division of Corporations

Florida Department of State
Division of Corporations
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Division of Corporations
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2018 APR 20 AM 8:31
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TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION
UNAGED CORPORATION

Certificate of Status	0
Certified Copy	1
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Electronic Filing Menu Corporate Filing Menu Help

APR 23 2018

T. SCOTT

(4)

H18000125470

COVER LETTER

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

SUBJECT: UNAGED CORPORATION
(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: JORGE A LOPEZ -ACCOUNTANT(ACCT#15423)
Name (Printed or typed)

13701 SW 88 STREET SUITE 200A
Address

MIAMI FL 33186
City, State & Zip

305-388-8406
Daytime Telephone number

ACCOUNTINGFINANCIAL@HOTMAIL.COM
E-mail address: (to be used for future annual report notification)

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

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: UNAGED CORPORATION

ARTICLE II PRINCIPAL OFFICE

Principal street address

460 NE 28 STREET APT 1406

MIAMI FL 33137

Mailing address, if different is:

SAME

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
TO ENGAGE IN ANY LAWFUL ACTIVITY PERMITTED BY THE LAWS OF THIS STATE.

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TALLAHASSEE FLORIDA

ARTICLE IV SHARES
The number of shares of stock is: 100 SHARES W/PAR OF $1 SHARE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DANIEL KASSAB-PRESIDENT
Address: 460 NE 28 STREET APT 1406
MIAMI FL 33137

Name and Title: JAMES GIRALDO-VICE PRESIDEN
Address: 460 NE 28 STREET APT 1406
MIAMI FL 33137

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

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: DANIEL KASSAB-PRESIDENT

Address: 460 NE 28 STREET APT 1406

MIAMI FL 33137

ARTICLE VII INCORPORATOR

The **name and address** of the incorporator is:

Name: DANIEL KASSAB-PRESIDENT

Address: 460 NE 28 STREET APT 1406

MIAMI FL 33137

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

X _____ 04/20/18

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.

X _____ 04/20/18

Required Signature/Incorporator Date

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