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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

18 MAY 22 AM 9:57

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T SCHROEDER

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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Articles

1. **CONACO MANAGEMENT INC.**

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

COVER LETTER

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

SUBJECT: CONACO MANAGEMENT INC
(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: Luis Gonzalez
Name (Printed or typed)

1724 NE 18 Street
Address

FORT LAUDERDALE FL 33305
City, State & Zip

3474172360
Daytime Telephone number

CONACOMANAGEMENT INC@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: CONACO MANAGEMENT INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different

1724 NE 18 ST
FORT LAUDERDALE FL 33305

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY LEGAL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LUIS GONZALEZ/Pres Name and Title: _____

Address: 1724 NE 18 ST Address: _____

FORT LAUDERDALE

FL 33305

Name and Title: LUIS GONZALEZ/Secretary Name and Title: _____

Address: 1724 NE 18 Street Address: _____

FORT LAUDERDALE

FL 33305

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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TALLAHASSEE, FLORIDA

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: LUIS GONZALEZ
Address: 1724 NE 18 ST
FORT LAUDERDALE FL 33305

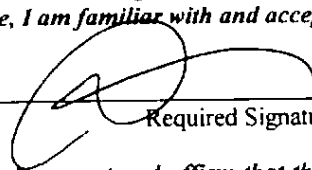
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: LUIS GONZALEZ
Address: 1724 NE 18 ST
FORT LAUDERDALE FL 33305

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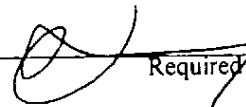
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

5/22/18
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.



Required Signature/Incorporator

Date