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## FLORIDA PROFIT/NON PROFIT CORPORATION FINKO COMPANY

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Corporate Filing Menu

N. SAMS Help

JUL 06 2018

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

he name of the corpor				
ARTICLE II PRINCIPAL OFFICE Principal street address			Mailing address, if different is:	
.7320 SW 1,40TH PA	SSAGE	27320 5	SW 140TH PASSAGE	
fomestead, flor	IDA 13032	HOMES	STEAD, FLORIDA 33032	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:		30		
ANY AND	ALL LAWFUL BUSINESS			
			TR.	
			. <u> </u>	
			<del></del>	
	·	~~~		
RTICLE IV SHAR  THE number of shares of	stock is:		· · · · · · · · · · · · · · · · · · ·	
he number of shares of	stock is:  iL OFFICERS AND/OR DIRECTORS  PRESIDENT	Name and Title	VICE PRESIDENT	
ne number of shares of	stock is:  iL OFFICERS AND/OR DIRECTORS  PRESIDENT	_ Name and Title _ Address:		
ne number of shares of  RTICLE V INITL  Name and Title	stock is:  AL OFFICERS AND/OR DIRECTORS  PRESIDENT	_		
ne number of shares of RTICLE V INITIA Name and Title	stock is:  AL OFFICERS AND/OR DIRECTORS  PRESIDENT  LUCIANE HELENA REZENDE FINK	_	CHRISTIANE MARIA FINK GRAE	
ne number of shares of RTICLE V INITIA Name and Title Address	stock is:  AL OFFICERS AND/OR DIRECTORS  PRESIDENT  LUCIANE HELENA REZENDE PINK  27320 SW 140TH PASSAGE	_ Addrešs:	CHRISTIANE MARIA FINK GRAE  27320 SW 140TH PASSAGE  HOMESTEAD, FLORIDA 33032	
ne number of shares of RTICLE V INITIA Name and Title Address	stock is:  AL OFFICERS AND/OR DIRECTORS  PRESIDENT  LUCIANE HELENA REZENDE FINK  27320 SW 140TH PASSAGE  HOMESTEAD, FLORIDA 33032	_ Addrešs:	CHRISTIANE MARIA FINK GRAE 27320 SW 140TH PASSAGE HOMESTEAD, PLORIDA 33032	
Name and Title	stock is:  AL OFFICERS AND/OR DIRECTORS  PRESIDENT  LUCIANE HELENA REZENDE FINK  27320 SW 140TH PASSAGE  HOMESTEAD, FLORIDA 33032	_ Address:  Name and Title	CHRISTIANE MARIA FINK GRAE  27320 SW 140TH PASŠAĢE  HOMESTEAD, FLORIDA 33032	
Name and Title  Name and Title  Address  Name and Title  Address	Stock is:  AL OFFICERS AND/OR DIRECTORS  PRESIDENT  LUCIANE HELENA REZENDE FINK  27320 SW 140TH PASSAGE  HOMESTEAD, FLORIDA 33032	_ Address: _ Name and Title _ Address: _	CHRISTIANE MARIA FINK GRAE  27320 SW 140TH PASSAGE  HOMESTEAD, FLORIDA 33032	
Name and Title:  Name and Title:  Address	Stock is:  AL OFFICERS AND/OR DIRECTORS  PRESIDENT  LUCIANE HELENA REZENDE FINK  27320 SW 140TH PASSAGE  HOMESTEAD, FLORIDA 33032	Address:  Name and Title Address:  Name and Title	CHRISTIANE MARIA FINK GRAE  27320 SW 140TH PASŠAĢE  HOMESTEAD, FLORIDA 33032	
Name and Title  Name and Title  Address  Name and Title  Address	Stock is:  AL OFFICERS AND/OR DIRECTORS  PRESIDENT  LUCIANE HELENA REZENDE FINK  27320 SW 140TH PASSAGE  HOMESTEAD, FLORIDA 33032	Address:  Name and Title Address:  Name and Title	CHRISTIANE MARIA FINK GRAE 27320 SW 140TH PASSAGE HOMESTEAD, FLORIDA 33032	

Name a	nd Tiste:	Name and Title:	
Addres	s	Address:	
	<del></del>	<del>-</del> -	
	<del></del>		<u>.</u>
ARTICLE VI The name and F	REGISTERED AGENT Torida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	CHRISTIANE MARIA FINK GRAEL	•	<b>k</b>
Address:	27320 SW 140TH PASSAGE		· · · · · · · · · · · · · · · · · · ·
,	HOMESTEAD, FLORIDA 33032	<del></del>	
ARTICI E VII	INCORPORATOR	· .	
	_		구 
	ddress of the Incorporator is:  LUCIANE HELENA REZENDE FINK		2
Name:	27320 SW 140TH PASSAGE	_	7.
Address.	HOMESTEAD, FLORIDA 33032		
ARTICLE VIII	EPFECTIVE DATE; other than the date of filing:	(OPTIONAL)	
(if an effective of filing.)	date is listed, the date must be specific and cann	ot be more than five days pri	or or 90 days atter the
Note: If the date the document's e	e inserted in this block does not meet the applicable affective date on the Department of State's records	e statutory filing requirements,	this date will not be listed as
Having been no this certificate, I	med as registered agent to accept service of proce am familiar with and accept the appointment as re	ss for the above Stated corpora egistered agent and agree to dct	tion at the place designated in in this capacity
Sha ton	DD.		7/2/2013
7 714541.00	Required Signature/Registered Agent		Date
I submit this doc	current and affirm that the facts stated herein an Department of State constitutes a third degree feto	y true, I am aware that the fal	se information submitted in a
aocument to the	pepartment of State constitutes a truta degree feto	ny approvince jac ni sio i i (22)	7/2/2018
\	red Signature Ancorporator	<u>.</u>	Date