

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000085826 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Ewail	Address:			
こいきナナ	AUGUESS:			

## FLORIDA PROFIT/NON PROFIT CORPORATION INTERNATIONAL FACTORING BROKERS CORPORATION

Certificate of Status	0		
Certified Copy	1		
Page Count	03		
Estimated Charge	\$78.75		

Electronic Filing Menu

Corporate Filing Menu

Help

ĵ,

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:
INTERNATIONAL FACTORING BROKERS CORPORATION
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
4H /3/LTMOREWAY SUITE 3/6. FR
ODRAL GABLES - MIAM, FL. 33/34.
ARTICLE III SHARES: The number of shares of stock is:
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
GILBERTO J. MORALES - DIRECTOR
LUIS RODOLFO DIAZ DIRECTOR
JUAN DIEGO DURAN. DIRECTOR.
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
GILBERTO J. MORALES
471 BILTHORE WAY, SUITE 316
CORAL GABLES MIANI, Fl. 83134.
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
CORAL GABLES, MIAHI, Fl. 23134.
WIEHE GARDLES MIAMI, +1. 33134.

## Required Signatures:

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

Registered Agent

submit this document and affirm that the facts stated herein are true. I am aware that he false information submitted in a document to the Department of State constitutes a hird degree felony as provided for in s.817.155, F.S.

ncorporator

Date