

4/26/2019

Division of Corporations

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Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
ANGULAR PROJECT CORP**

Certificate of Status	0
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ARTICLES OF INCORPORATION

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

ARTICLE I NAME ANGULAR PROJECT CORP

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICEPrincipal ~~street~~ address

Mailing address, if different is: _____

8930 NW 97th AVE

ST. MAARTEN AT GRAND BAY C

DORAL, FL 33178

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: THE PURPOSE FOR THIS ENTITY IS ARCHITECTURE,

INTERIORS AND TEXTILE DESIGN, AND ANY AND ALL LAWFUL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Maria Gabriela Rojas Montes de Oca (D)

Name and Title: _____

Address 8930 NW 97th AVE

Address: _____

ST. MAARTEN AT GRAND BAY C

DORAL, FL 33178

Name and Title: Edgardo Luis Berti Marquez (D)

Name and Title: _____

Address 8930 NW 97th AVE

Address: _____

ST. MAARTEN AT GRAND BAY C

DORAL, FL 33178

Name and Title: _____

Name and Title: _____

Address _____

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: Edgardo Luis Berti Marquez
Address: 8930 NW 97th AVE ST. MAARTEN AT
GRAND BAY C, DORAL, FL 33178

ARTICLE VII INCORPORATOR

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

Name: Maria Gabriela Rojas Montes de Oca
Address: 8930 NW 97th AVE ST. MAARTEN AT
GRAND BAY C, DORAL, FL 33178

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



Required Signature/Registered Agent

04-24-2019
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

04-24-2019
Date