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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : FANJUL CPA, INC.
Account Number : I20130000039
Phone : (305)603-8791
Fax Number : (877)503-6086

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
EVENTS SPARTA CORP

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

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

ARTICLE I NAME EVENTS SPARTA CORP

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

12154 SW 131ST AVENUE

MIAMI, FL 33186

Mailing address, if different is:

12154 SW 131ST AVENUE

MIAMI, FL 33186

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL PURPOSES

ARTICLE IV SHARES 1000

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ESTEBAN F MUNOZ-P

Address: 12154 SW 131ST AVENUE
MIAMI, FL 33166

Name and Title: ALFONSO MUNOZ VIVTESCAS-VP

Address: 12154 SW 131ST AVENUE
MIAMI, FL 33186

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 AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: ESTEBAN F MUNOZ

Address: 12154 SW 131ST AVENUE

MIAMI, FL 33186

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: ESTEBAN F MUNOZ

Address: 12154 SW 131ST AVENUE

MIAMI, FL 33186

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 

Required Signature/Registered Agent

7/3/19

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 

Required Signature/Incorporator

7/3/19

Date

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