

Division of Corporations

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Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : VDT CORPORATE SERVICES
Account Number : 120180000047
Phone : (305) 878-1516
Fax Number : (786) 542-5995

****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 FRANG CORPORATION

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

JUL 29 2019

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Corporate Filing Menu

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COVER LETTER

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

SUBJECT: FRANG CORPORATION

(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: VDT CORPORATE SERVICES LLC

Name (Printed or typed)

150 SE 2ND AVE SUITE 905

Address

MIAMI, FLORIDA 33131

City, State & Zip

+1 (305) 503-9867

Daytime Telephone number

INCORPORATION@SAINTJOSEPHGROUP.COM

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: FRANG CORPORATION**ARTICLE II PRINCIPAL OFFICE**Principal street address150 SE 2ND AVE SUITE 906MIAMI FLORIDA 33131

Mailing address, if different is:

ARTICLE III PURPOSEThe purpose for which the corporation is organized is: MANAGEMENT CONSULTING**ARTICLE IV SHARES**The number of shares of stock is: 2000 SHARES**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Angel Ramos Castillo - DirectorAddress: 150 SE 2ND AVE SUITE 906MIAMI, FLORIDA 33131Name and Title: Francisco J. G. Gonzalez-DirectorAddress: 150 SE 2ND AVE SUITE 906MIAMI, FLORIDA 33131

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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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: VDT CORPORATE SERVICES LLC
 Address: 150 SE 2ND AVE SUITE 905
MIAMI, FLORIDA 33131

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: DANIEL MERLINO
 Address: 150 SE 2ND AVE SUITE 905
MIAMI, FLORIDA 33131

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 affirm familiar with and accept the appointment as registered agent and agree to act in this capacity*



 Required Signature/Registered Agent

07/29/2019

 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

07/29/2019

 Date

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