## 08/21/2019 1:

## Torida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 : (305)552-5973 Phone

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.\*\*

Ema11	Address:		
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## FLORIDA PROFIT/NON PROFIT CORPORATION **ELITE SHOES, INC**

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

Electronic Filing Menu

Corporate Filing Menu

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N CULLIGAN: AUG 22 2013

## ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:	ر آ
Elite Shoes, Inc	21
ARTICLE II PRINCIPAL OFFICE:	ر در ري
The principal street address and mailing address is:  31050 SW 193 Ave  Homestead FL 33030.	
ARTICLE III SHARES: The number of shares of stock is:()O	-
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICIERS: AFredo Baryalo Cardoso ()	5)
	<del></del>
	_ <del>_</del>
ARTICLE V INITIAL REGISTERED AGENT AND STREET (1) DRI  The name and Florida street address (PO Box not acceptable) of the regis: ered ag	
Alfredo Baryolo Cardoso	
Homestead, FL 3303.	_ <del>_</del> _
ARTICLE VI INCORPORATOR: The name and address of the Incorporation Alfredo Baryold Cardoso.	ator is:
31050 SW 193 Ave.	
Homestead, TL 33030	

AATICLE	VII P	rpose		
To Sell	Footwear,	clothing, Accesories	kni	more.

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 3/20/20/9

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 5 tate constitutes a third degree felony as provided for in s.817.155, F.S.

SECRETARY OF STATE