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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 ENTERPRISES LLC
 Account Number : I20190000080
 Phone : (305)603-8791
 Fax Number : (877)503-6086

****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

CITY COOL KENDALL SOLUTIONS CORP

2019 OCT 11 PM 12:09

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

2019 OCT 11 AM 8:15

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OCT 14 2019

ARTICLES OF INCORPORATION

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

ARTICLE I NAME CITY COOL KENDALL SOLUTIONS CORP

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

19906 SW 130 AVE

MIAMI, FL 33177

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ANY AND ALL LAWFUL BUSINESSES

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: EVELYN N LYON QUEVEDO - P Name and Title: _____

Address: 19906 SW 130 AVE Address: _____
MIAMI, FL 33177

Name and Title: JUAN A NAVEDA LYON - VP Name and Title: _____

Address: 19906 SW 130 AVE Address: _____
MIAMI, FL 33177

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

10 OCT 11 AM 8:15

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: JUAN A NAVEDA LYON
 Address: 19906 SW 130 AVE
MIAMI, FL 33177

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JUAN A NAVEDA LYON
 Address: 19906 SW 130 AVE
MIAMI, FL 33177

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 STATE OF FLORIDA

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

[Signature] _____ 10/11/2019
 Required Signature/Registered Agent 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.

[Signature] _____ 10/11/2019
 Required Signature/Incorporator Date