

11/6/2019
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Florida 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 : FANJUL ENTERPRISES LLC
Account Number : I201900000080
Phone : (305)603-8791
Fax Number : (877)503-6086

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Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
APPAREL ELECTRONICS SALES CORP

Certificate of Status	0
Certified Copy	0
Page Count	01
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Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION
in compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME APPAREL ELECTRONICS SALES CORP

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address: _____

Mailing address, if different is: _____

1601 SW 51ST TERRACE APT 1223

GAINESVILLE FL 32607

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: CARLOS BALI - P

Name and Title: _____

Address: _____

1601 SW 51ST TERRACE APT 1223

Address: _____

GAINESVILLE, FL 32607

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

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: CARLOS BALI - PAddress: 1601 SW 51ST TERRACE APT 1223GAINESVILLE, FL 32607**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: CARLOS BALI - PAddress: 1601 SW 51ST TERRACE APT 1223GAINESVILLE, FL 32607**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: _____ (OPTIONAL)

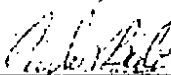
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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 Agent11/05/2019_____
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/Incorporator11/05/2019_____
Date