

P20000001887

Florida Department of State
Division of Corporations
Corporate Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H20000009645 3)))



H200000096453ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

RECEIVED

2020 JAN -9 PM 1:37

TO: DIVISION OF CORPORATIONS
COMMERCIAL SERVICES

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

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
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.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
GRUPO FZ INC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

2020 10 2020

T. SCOTT

2020 JAN -9 PM 12:46

FILED

FILED

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

GRUPO FZ INC

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

2490 SE 14TH ST

HOMESTEAD, FL 33035

ARTICLE III SHARES: The number of shares of stock is: 1000

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

PRESIDENT - ZHUWEN FENG

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

LESTER RIVERO

8040 NW 95TH ST SUITE 329

HIALEAH FL 33016

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

ZHUWEN FENG


8040 NW 95TH ST SUITE 329

HIALEAH, FL 33016

2020 JAN - 9 PM 12:46
FILED

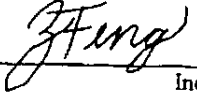
Required Signatures:

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 12/19/19
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.



Incorporator 12/19/2019
Date