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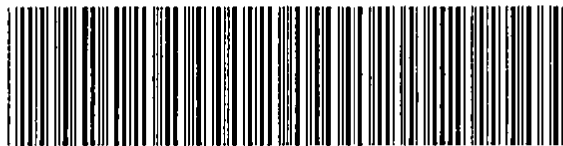
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SECRETARY OF STATE  
TALLAHASSEE, FL

20 JAN 14 AM 10:07

20 JAN 14 3:49 56

## COVER LETTER

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

**SUBJECT: AC&FG INVESTMENTS GROUP CORP**  
(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      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status  
**ADDITIONAL COPY REQUIRED**

FROM: OLGA HERNANDEZ  
\_\_\_\_\_  
Name (Printed or typed)

9010 SW 137 AVE SUITE 205  
\_\_\_\_\_  
Address

MIAMI, FL 33186  
\_\_\_\_\_  
City, State & Zip

786-422-4209  
\_\_\_\_\_  
Daytime Telephone number

OLGA@ITAXPROFESSIONAL.COM  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

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

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

**ARTICLE I NAME**

The name of the corporation shall be: **AC&FG INVESTMENTS GROUP CORP**

**ARTICLE II PRINCIPAL OFFICE**

Principal ~~street~~ address

Mailing address, if different is:

333 UNIVERSITY DRIVE # 402

MIAMI, FL 33134

333 UNIVERSITY DRIVE # 402

MIAMI, FL 33134

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: GOMEZ, LUIS FRANCISCO, PRESIDENT

Address 333 UNIVERSITY DRIVE # 402

MIAMI, FL 33134

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: COMPERNOL, AENEAS, VICE PRESIDENT

Address 333 UNIVERSITY DRIVE # 402

MIAMI, FL 33134

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: GOMEZ, JORGE H, SECRETARY

Address 333 UNIVERSITY DRIVE # 402

MIAMI, FL 33134

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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JAN 14 AM 10:08  
TALLAHASSEE, FL  
SECRETARY OF STATE

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: GOMEZ, LUIS FRANCISCO  
Address: 333 UNIVERSITY DRIVE # 402  
MIAMI, FL 33134

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TALLAHASSEE, FL

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: GOMEZ, LUIS FRANCISCO  
Address: 333 UNIVERSITY DRIVE # 402  
MIAMI, FL 33134

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 01/10/2020 (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*

Luis Francisco Gomez

Luis Francisco Gomez: Jan 14, 2020

Required Signature/Registered Agent

01/10/2020

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.*

Luis Francisco Gomez

Luis Francisco Gomez: Jan 14, 2020

Required Signature/Incorporator

01/10/2020

Date