

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 : 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
LOSAP CORP

FEB 07 2020
T. SCOTT

Certificate of Status	0
Certified Copy	0
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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
COMMERCIAL SERVICES

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ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: LOSAP CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

4540 ROYAL PALM AVE APT 1MIAMI BEACH, FL 33140**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: _____

ANY AND ALL LAWFULL PURPOSES**ARTICLE IV SHARES**The number of shares of stock is: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: TOMAS LOPEZ SAVOY-P

Name and Title: _____

Address 4540 ROYAL PALM AVE APT 1

Address: _____

MIAMI BEACH, FL 33140

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

2020 FEB -6 AM 12:05
FILED
CLERK OF DISTRICT COURT
MIAMI BEACH, FL

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: TOMAS LOPEZ SAVOY
Address: 4540 ROYAL PALM AVE APT 1
MIAMI BEACH, FL 33140

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: TOMAS LOPEZ SAVOY
Address: 4540 ROYAL PALM AVE APT 1
MIAMI BEACH, FL 33140

ARTICLE VIII EFFECTIVE DATE:

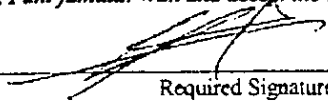
Effective date, if other than the date of filing: _____ (OPTIONAL)

(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

X



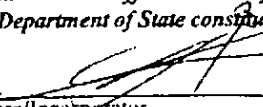
Required Signature/Registered Agent

02/01/2020

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.

X



Required Signature/Incorporator

02/01/2020

Date