

P2000002204

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

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Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
SALTY MOTION CORP

Certificate of Status	0
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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 NAMEThe name of the corporation shall be: SALTY MOTION CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

11224 NW 73 ST
DORAL, FL 33178**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: _____

ANY AND ALL LAWFUL PURPOSES**ARTICLE IV SHARES**The number of shares of stock is: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: CARLOS PERERA-P

Name and Title: _____

Address

11224 NW 73RD ST

Address: _____

DORAL, FL 33178

Name and Title: _____

Name and Title: _____

Address

Address: _____

Name and Title: _____

Name and Title: _____

Address

Address: _____

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SOUTHERN
ASSOCIATES

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 PERERAAddress: 11224 NW 73RD STDORAL, FL 33178**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: CARLOS PERERAAddress: 11224 NW 73 STDORAL, FL 33178**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

X

3/11/20
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

Date

3/11/20