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To:

Division of Corporations

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Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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## FLORIDA PROFIT/NON PROFIT CORPORATION **AGRIMARIO CORP**

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

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

<b>ARTICLE 1</b> NAME: The name of the corporation is:
AGRIMARIO CORP
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:  1685 W 41st GH-B, HiAleAh 33012  Florion
ARTICLE III SHARES: The number of shares of stock is:
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:  MARIO A. SANCHEZ CIPTISMO (F)
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
MARIO A. SANCHEZ CIPRIANO 1685 W 41 St apto 3, Higher (FL) 3301
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
MARIOA SANCHEZ CIPRIANO
1695 W 41 ST apT 3
HIALEAH FL 33012

## 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

!.¹at**∉** 

CE/15/2020.

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 \$1.817.155, F.S.

Incorporator

2020 JUN 15 AM 4