Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

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 **RENYMIAMI INC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

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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 1 NAME The name of the corpora	RENYMIAMI INC			
ARTICLE II PRING		Mail	ling address, if different is:	
ARTICLE III PURPO The purpose for which ANY AND ALL LAW	the corporation is organized is:			
ARTICLE IV SHAR The number of shares of	<i>ES</i> stock is: 1000		20	
	AL OFFICERS AND/OR DIRECTORS 2: REINIER CANEIRO BRITO-P	Name and Title:	子 -: -:	相談の
Address		A .1.1		i i i
Name and Title		Name and Title: Address:		
Name and Title:		Name and Title:		
Address		Address:		<del></del> -

Fro	m: Robert Fanjul Fax: 187	775036086	То:	Fa	x: (850) 617-6381	Page: 3 of 3	08/06/2020 10:34 AM
	Name an	d Title:			Name and Title:		
•	Address				Address:		
					<u> </u>		
					<del></del>		
	ADMICE ALSO		ACENT				
	ARTICLE VI The name and F	REGISTEREL lorida street ad	dress (P.O. Box N	NOT acceptable)	of the registered agent i	s:	
í	Name:		ANEIRO BRITO		_		
	Address:	6470 SW 41	ST ST APT 27				
		MIAMI, FL	33155		_ <del>_</del> ·		
	ARTICLE VII The name and a	ddress of the In		то			
	Name:	<del></del>			<del></del>		
	Address:	54/0 51	V 41ST ST APT 27		<del></del>		
		MIAMI,	FL 33155	•	<del></del>		
	ARTICLE VIII	FFFFCTIVE	: DATE:		<i>.</i> .		•
	Effective date, if	other than the	date of filing:		(OPTI		
	(If an effective of filing.)	date is listed, th	ne date must be s	pecific and can	not be more than five	days prior or 90 da	ays after the
			block does not not the Department	• •	le statutory filing requiss.	irements, this date w	rill not be listed as
	Having been nar certificate Tam X	lamiliar with an	d agent to accept s d accept the appo	intment as regisi	for the above stated co tered agent and agree to	o act in this capacity X	ee designated in this  - 05 - 2020  Date
	I subprit this do document to the	ument and aff. Department of .	irm that the facts State constitutes a	stated herein a third degree feli	re true. I am aware th ony as provided for in s	at the false informa .817.155, F.S.	tion submitted in a
	X Regular & Strange	te/Incorporato		<del></del>		Date XOB	05-20-20-
		7					