

9/18/2020

Division of Corporations

P2000073048

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : LEGALINC CORPORATE SERVICES INC.
Account Number : I20180000011
Phone : (844)386-0178
Fax Number : (214)317-4754

****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
CIC-LAC Inc

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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T. BURCH

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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: CIC-LAC Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

20871 Johnson St., Ste 115
Pembroke Pines, Fl. 33029

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Professional
membership organization

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ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jorge Hernandez - Director Name and Title: _____

Address: 1901 Brickell Ave
Apt. B2401
Miami, Fl. 33129

Address: _____

Name and Title: Patricia Morales - Vice President of Operations Name and Title: _____

Address: 20871 Johnson St.
Suite 115
Pembroke Pines, Fl. 33029

Address: _____

Name and Title: Cesar Renan Nova - Financial Officer Name and Title: _____

Address: 8008 NW 68 St.
Miami, Fl. 33166

Address: _____

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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: Patricia Morales
Address: 20831 Johnson St., Suite 115
Pembroke Pines, FL 33029

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jorge Hernandez
Address: 1901 Brickell Ave., Apt. B2401
Miami, FL 33129

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.

Patricia Morales 09-17-20
Required Signature/Registered Agent 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.817.135, F.S.

Jorge Hernandez 09/17/20
Required Signature/Incorporator Date

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