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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 : ARIMIR SERVICES GROUP LLC
Account Number : I20200000022
Phone : (305)420-5722
Fax Number : (305)643-5225

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: alexandersarante@gmail.com

**FLORIDA PROFIT/NON PROFIT CORPORATION
SUNFLEX FUELS III INC**

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

2020 SEP 18 PM 3:01

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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: SUNFLEX FUELS III INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

6120 NW 27TH AVE

MIAMI FL 33142

Mailing address, if different is:

1910 NW 7TH ST

MIAMI FL 33125

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ALEXANDER I SARANTE - President

Name and Title: _____

Address 1910 NW 7TH ST

Address: _____

MIAMI FL 33125

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

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: ALEXANDER J SARANTE
 Address: 1910 NW 7TH ST
MIAMI FL 33125

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ALEXANDER J SARANTE
 Address: 1910 NW 7TH ST
MIAMI FL 33125

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

 Required Signature/Registered Agent
 Date 9/18/2020

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 in s.817.155, F.S.

 Required Signature/Incorporator
 Date 9/18/2020

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