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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 : LAMADRID FINANCIAL SERVICES CORP
Account Number : I20200000059
Phone : (954)727-9771
Fax Number : (954)727-9773

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

Email Address: diana@lamadndfinancial.com

**FLORIDA PROFIT/NON PROFIT CORPORATION
NIDAMA CORP**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

2020 NOV -3 PM 12:11

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Corporate Filing Menu

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COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: NIDAMA CORP
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: EDUARDO GUSTAVO PALOMBO
Name (Printed or typed)

1306 CROTON COURT
Address

WESTON, FL 33327
City, State & Zip

54-911-4477-3133
Daytime Telephone number

epalombo@palombohnos.com.ar
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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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: NIDAMA CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address
1306 CROTON COURT
WESTON, FL 33327

Mailing address, if different is:
1306 CROTON COURT
WESTON, FL 33327

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: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: EDUARDO GUSTAVO PALOMBO Name and Title: PRESIDENT

Address: 1306 CROTON COURT Address:
WESTON, FL 33327

Name and Title: DANIEL EDUARDO PALOMBO Name and Title: DIRECTOR

Address: 1306 CROTON COURT Address:
WESTON, FL 33327

Name and Title: NICOLAS PALOMBO Name and Title: DIRECTOR

Address: 1306 CROTON COURT Address:
WESTON, FL 33327

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Name and Title: MARIA DE LA PAZ PALOMBO Name and Title: DIRECTOR
Address: 1306 CROTON COURT Address: _____
WESTON, FL 33327 _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: LAMADRID FINANCIAL SERVICES CORP
Address: 1265 S PINE ISLAND RD
PLANTATION, FL 33324

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: _____
Address: _____

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 11/03/2020 (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 11/03/2020

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.

EDUARDO GUSTAVO PALOMBO
Required Signature/Incorporator
Date 11/03/2020