Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

3052201440

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

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 **EMPACAR AGROSERVICES, CORP**

Certificate of Status	0
Certified Copy	1
Page Count	03
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J. FASON

DEC 14 2020

Electronic Filing Menu

Corporate Filing Menu

Help

3052201440

ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

ARTICLE II PRINCIPAL OFF	ICE:
The principal street address and mailing a	address is:
DELVISTA BUILDING TOWER II	
20355 N.E 34TH COURT AVENTURA, FL 33180	
	· · · · · · · · · · · · · · · · · · ·
ARTICLE III SHARES: The number of shares of stock	k is: <u>100</u>
ARTICLE IV INITIAL DIRECTORS AND	/OR OFFICERS:
MARIO EMIDIO MONTEROS (P)	
EDUARDO MADE (D)	
	782
	· · · · · · · · · · · · · · · · · · ·
ADTICLE V. TANIMAL DEGLOTED TO A COLUMN	
The name and Florida street address (PO Box not acceptable	DSTREET ADDRESS:
EDUADO MADE	e) of the registered agent is
DELVISTA DUU DING TOMED II	
20355 N.E 34TH COURT AVENTURA, FL 33180	
ARTICLE VI INCORPORATOR: The name and add	ress of the Incorporator is:
DUADO MADE	
DELVI <u>STA BUILDING TOWER II</u>	

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

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.817.155, F.S.

Incorporator

Date

DEC 11 PM12: 1