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COVER LETTER

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

SUBJECT: FIE	DAR CORP		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u> I	UDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the arti	cles of incorporation and	l a check for:
∑ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate o Status
		ADDITIONAL CO	PPY REQUIRED
FROM: _C	CARLA MARCELO Name	(Printed or typed)	
	050 W PALMETTO PARK	ROAD. #300.	
	BOCA RATON FL 33433		· · · · · · · · · · · · · · · · · · ·
	561 403 9084	State & Zip	
	Daytime To	clephone number	· · · · · · · · · · · · · · · · · · ·
0:	PERATIONS@CORPSVCSINT		
	E-mail address: (to be used	l for future annual report n	otification)

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

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

TICLE I NAME	ETRAD COPP				
e name of the corporation	on shall be: FIBAR CORP		· · · · · · · · · · · · · · · · · · ·		
RTICLE II PRINCI	PAL OFFICE				
P	rincipal street address		Mailing address, i		
5550 GLADES R	OAD. STE #300	7.0.5	O W PALMETT	O PARK	_RD#3
BOCA RATON FL	33431	•	BOCA RATON	FL 334	33
DTICLE III DUDDOS	C.C.				
RTICLE III PURPOS he purpose for which the	e corporation is organized is:				
INTL CONSU	LTING, LOGISTICS & PR	ROCUREMENT	OF EQUIPME	NT,	
GOODS, SERV	ICES & SUPPLIES FOR I	T & TELECO	M ENTERPRIS	SES.	
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RTICLE IV SHARES	\$ 100.000			٢	2
ne number of shares of st	ock is: 100,000				6
	OFFICERS AND/OR DIRECTORS FRANCO V, WALTER J PRESIDENT	Name and T	itle:S	ECRETAR	<u> </u>
Address _	19712 DINNER KEY DRIV	/E . Address:	19712 DIN	VER KEY	DRIVE.
-	BOCA RATON FL 33498		BOCA RATO	N FL 3	3498
-		_ _			
Name and Title:_		Name and T	itle:	••	
Address _		Address:			
-				<u>.</u>	
-					
Name and Title:		Name and T	itle:		
_					
Address _	<u> </u>	Address:			
-			- 		

Mariic and	Title:	Name and Title:	
Address		Address:	
			
ARTICLE VI R	REGISTERED AGENT prida street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name:	MARCELO, CARLA		
Address:	7050 W PALMETTO PARK ROAD.	#300.	
	BOCA RATON FL 33433		
	NCORPORATOR		
The name and add	dress of the Incorporator is:		
Name:	FRIAS, PATRICO		
Address:	7050 W PALMETTO PARK ROA	D. #300.	
	BOCA RATON FL 33433		
ARTICLE VIII Effective date, if o	EFFECTIVE DATE: other than the date of filing:	. (OPTIONAL)	
(If an effective da	te is listed, the date must be specific and cannot		
filing.)		_	
	inserted in this block does not meet the applicable sective date on the Department of State's records.	statutory filing requirements	s, this date will not be lis
Having been name certificate, I am fa	ed as registered agent to accept service of process for miliar with and accept the appointment as registere	r the above stated corporation and agent and agree to act in t	n at the place designated this capacity
	1	·	MARCH 25, 2
	Required Signature/Registered Agent		Date
I submit this docu	ment and affirm that the facts stated herein are t	rue. I am aware that the fa	dse information submitt
I submit this docu document to the D	ment and affirm that the facts stated herein are to epartment of State constitutes a third degree felony	rue. I am aware that the fa as provided for in s.817.155	dse information submitt i, F.S.