

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000280560 3)))



H210002805603ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

	Division of Corporations Fax Number : (850)617-6381		
From:	Account Name : LAZARUS CORPORA Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944	TE FILING SERVICE, INC.	1čů2
an	the email address for this busines nual report mailings. Enter only o mail Address:	ss entity to be used for futur ne email address please.**	re
r <u>=::::::::::::::::::::</u>			<u>ست</u> میں ا
	FLORIDA PROFIT/NON PRO CF CAPITAL		<u>م</u>
	Certificate of Status		
	icertificate of Status		
	Certificate of Status Certificat Copy	1	
	Certified Copy Page Count	03	
	Certified Copy		
	Certified Copy Page Count	03	
	Certified Copy Page Count	03	

PH 7:07

23

21.11

ŕ

.

# **ARTICLES OF INCORPORATION**

In compliance with Chapter 607 (Profit)

**ARTICLE I** NAME: The name of the corporation is:

## <u>CF Capital Corp</u>

# ARTICLE II \_ PRINCIPAL OFFICE:

The principal street address and mailing address is:

## 1430 SW 149th Ave

#### <u>Miami, FL 33194</u>

ARTICLE III SHARES: The number of shares of stock is: \_\_\_\_\_100\_\_\_.

## ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Frist Name	Middle Name/Initial	Last Name(s)	
Charlie	L	Franks	Vice President
Eymard	Alfonso	Cabrales Delgado	'Freasurer
Katerin	Mayerly	Mejia Vergel	Vice President
Claudia	Patricia	Prada Guzman	Vice President
Carlos	Alberto	Manjarres Roa	Vice President
Ingrith	Catalina	Lemus Medina	Vice President
Carlos	Mario	Guevara Pereira	Vice President
Luis	Arturo	Baquero Franco	President
Magda	Ruritza	Tautiva Peña	Vice President

# ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

## <u>Charlie L Franks</u>

1430 SW 149th Ave.

#### Miami, FL 33194

ARTICLE VI \_\_\_\_ INCORPORATOR: The name and address of the Incorporator is:

Charlie L Franks

1430 SW 149th Ave.

#### Miami, FL 33194

**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

<u>7/21/2021</u> 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.

7/21/2021 Incorporator Date