

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:

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FLORIDA PROFIT/NON PROFIT CORPORATION
CARYCRUZ&SIMMON CORP

Certificate of Status	0
Certified Copy	1
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Corporate Filing Menu

Help

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

ARTICLE I NAME: The name of the corporation is:

Cary Cruz & Simon Corp

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

5360 NW 180 Terra Miami Gardens
FL 33055

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICER:

Anay Simon (P)

Livan Llanes Rojas (VP)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Anay Simon
5360 NW 180 Terra Miami
Gardens FL 33055

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

Anay Simon
5360 NW 180 Terra Miami Gardens
FL 33055

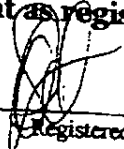
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FORM 1001

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

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SECRETARY OF STATE
TALLAHASSEE, FL