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To:

Division of Corporations

Fax Number : (850)617-6381

From:

: ALEX PINA CO. Account Name Account Number : I20190000095 : (305)803-8471 Phone

Fax Number : (305)602-3977

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

client@alexpina.co

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FLORIDA PROFIT/NON PROFIT CORPORATION FERROSCAR INC

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Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

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

The name of the corporat	ion shall be: Ferroscar	Inc	
ARTICLE II PRINC 6045 NW 104th path	CIPAL OFFICE Principal street address	Mailing add	iress, if different is:
Medisy, FL 33178			
	DSE he corporation is organized is:	any And All Lawful Purposes	
			2822
ARTICLE IV SHARI The number of shares of	<u>ES</u> 10,000 stock is:		N 28 ALI
	OSCAR A Cannistra Dun - President	None and Title	9 50
Address	6045 NW 104th path		
	Medley, FL 33178	-	
Name and Title:	·	Name and Title:	
Address		Address:	
Name and Title:	-	Name and Title:	
Address		Address:	

Page: 4 of 4	2022-01-28 17:22:0	2 GMT	1305602	3977		Fr
Title:		Name and Title:				
		Address:				
	-					
IFGISTERED AGENT						
	NOT acceptable) of	the registered agent i	s:			
Alex Pina Co.						
8400 NW 36th St Ste 450	<u>. </u>					
Doral, FL 33166						
dress of the Incorporator is:					63	
Oscar A Cannistra Dur	<u> </u>			in O	022	
6045 NW 104th path				12 AP	JAN	; ,
Medley, FL 33178				ं ते. इ.स.	28 28	
				1. OH	₹ [ŋ
EFFECTIVE DATE:		(OPTI	ONAL)	SIX	₩ C	フ
other than the date of filing:						
other than the date of filing: ate is listed, the date must be	specific and cannot	be more than five	days prior	æ € Ødd	ay es fiter the	
2	EGISTERED AGENT Initia street address (P.O. Box Alex Pina Co. 8400 NW 36th St Ste 450 Doral, FL 33166 ENCORPORATOR dress of the Incorporator is:	EGISTERED AGENT Inida street address (P.O. Box NOT acceptable) of a Alex Pina Co. 8400 NW 36th St Ste 450 Doral, FL 33166 ENCORPORATOR dress of the Incorporator is:	Address: ##################################	Address: #### Address: ##################################	Address: ### Address: #### Address: #### Address: #### Address: ##################################	### PEGISTERED AGENT Initial street address (P.O. Box NOT acceptable) of the registered agent is: Alex Pina Co. ###################################

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a

Required Signature/Registered Agent

Required Signature/Incorporator

document to the Department of State constitutes a third degree felony as provided for in \$.817.155, F.S.

01/28/2022

01/28/2022

Date

Date