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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : SALCEDO ATTORNEYS @ LAW, P.A.  
Account Number : I20100000021  
Phone : (305)375-0640  
Fax Number : (305)375-0708

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

Email Address: FGIALLANZA@LAWJSH.COM

**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**IMMO OUEST USA CORP**

Certificate of Status	0
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T. SCOTT

FEB 28 2022

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**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**The name of the corporation shall be: IMMO QUEST USA CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

13301 SKIING PARADISE BOULEVARD  
CLERMONT, FL 34711**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: SYLVIE RANSON, DIRECTOR Name and Title: FRANK S. LABOULFIE, DIRECTORAddress 1, RUE JEAN GIRAUDOUX Address: 650 NE 32ND ST, UNIT 4603  
PARIS, FRANCE 75116 MIAMI, FL 33137, USA

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

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Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: JSH REGISTER AGENT SERVICES INC  
Address: 200 S. BISCAYNE BOULEVARD, SUITE 2700  
MIAMI, FL 33131

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: FRANCK S. LABOULFIE  
Address: 650 NE 32ND STREET, UNIT 4603  
MIAMI, FL 33137

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

\_\_\_\_\_  
Required Signature/Registered Agent  
02/23/2022  
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.*

\_\_\_\_\_  
Required Signature/Incorporator  
02/23/2022  
Date