**Division of Corporations** Electronic Filing Cover Sheet

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To:			
	Division of Corporations		
	Fax Number : (850)617-6381	<del></del> 1	r

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 : (305)552-5973 Phone : (305)675-5944 Fax Number

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

## FLORIDA PROFIT/NON PROFIT CORPORATION JOFFRE INVERSION CORP

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

- ARTICLE I NAME: The name of the corporation is:	
JOFFRE INVERSION CORP	
· ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	
1790 NW 19 THTER MIAMI	
FL 33125	
ARTICLE III SHARES: The number of shares of stock is:	
- ARTICLE IV INITIAL DIRECTORS AND/OR OFFICE RS:	
YOEL BANO TOFFRE (P)	
SSEC	
FLER FLER	
RIO	-
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:	
The name and Florida street address (PO Box not acceptable) of the registered agent is:	
VOEL BAND JOFFRE	
1790 NW 19th TER	
MIAMI FL 33125	
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:	
VOEL BAND JOFFRE	
100	
1790 NW 19th TER	

## **Required Signatures:**

Having be corporation	en named as registered agent to accept service of on at the place designated in this certificate, I am appointment as registered agent and agree to ac	familian with and account the
	Registered Agent	Date
the talse in	is document and affirm that the facts stated here formation submitted in a document to the Depart e felony as provided for in s.817.155, F.S.	in are true. I am aware that tment of State SEE, FLORID.  Date Date 14