Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : ELO ENTERPRISES, INC

Account Number : I20150000109 ; (561)544-8862 Phone

Fax Number : (954)697-0130

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

Email Address: SALES@ELOENTERPRISES.US

FLORIDA PROFIT/NON PROFIT CORPORATION DRB IMPORT AND EXPORT, CORP.

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S. CHATHAM

APR 12 2022

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Corporate Filing Menu

Help

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

	IPAL OFFICE		
	Principal street address		Mailing address, if different is:
4700 Boca Raton Blvd#	202		· · · · · · · · · · · · · · · · · · ·
Boca Raton, FL 33431			
RTICLE III PURPO	<u>DSE</u> he corporation is organized is: <u>Any ar</u>	nd all lawful business.	
de purposo for which a	to comportation in organization in. 1407 an		
			
			
	<u> </u>		
-		<u></u>	
ARTICLE IV SHARI	<u>ES</u>		
	stock is: 1000		
		-	
	L OFFICERS AND/OR DIRECTOR.		
Name and Title	: Daniel Rauzer Branquinho - P	Name and Title:	
Address	4700 Boca Raton Blvd #202	Address:	
	Boca Raton, FL 33431		
		<u> </u>	
Name and Title:		Name and Title:	
Name and Title:			
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Name an	d Title:	Name and Title:	<u>.</u>
Address		Address:	
		_	
	·		
ARTICLE VI The name and F	REGISTERED AGENT lorida street address (P.O. Box NOT acceptable) o	f the registered agent is:	
Name:	ELO ENTERPRISES, INC.	_	
Address:	4700 NW Boca Raton Blvd #202	_	
	Boca Raton, FL 33431	_	
ARTICLE VII	INCORPORATOR		
The name and a	ddress of the Incorporator is:		
Name;	Daniel Rauzer Branquinho	_	
Address:	4700 NW Boca Raton Blvd #202	_	
	Boon Raton, FL 33431	_	
Effective date, if (If an effective of filing.) Note: If the date	EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific and cannot enserted in this block does not meet the applicable effective date on the Department of State's records	e stanutory filing requirements, this d	
Having been nar certificate, I am	med as registered agent to accept service of process familiar with and accept the appointment as register	for the above stated corporation at the	e place designated in this city 04/08/2022
	Required Signature/Registered Agent		Date
I submit this do document to the	cument and affirm that the facts stated herein are Department of State constitutes aghird degree fel	e true. I am aware that the false inf ony as provided for in s.817.155, F.S	ormation submitted in a S. 04/08/2022
Required Signat	ure/Incorporator	Date	22 APR I SECRETAR FALLAHASS
			LED 1 PH 1: