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Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : DOSSANTOS AND MACHADO, LLC

Account Number : 120140000089 : (754)301-2128 Pax Number : (954)252-4650

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

Email Address: INFO(OGFSTAX ACC

FLORIDA PROFIT/NON PROFIT CORPORATION AMERICAN ROYALTY CONTRACTOR CORP

Certificate of Status Certified Copy 0 Page Count 01 Estimated Charge \$70.00

COVER LETTER

#230002997943

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: AME	RICAN ROYALTY CONTRACTOR (
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an o	original and one (1) copy of the arti	cles of incorporation and	I a check for:		
☐ \$70.00 Filing Fee		□ \$78.75 Filing Fee & Certified Copy	& Certificate of Status		
		L			
FROM: _	GILVAM DOS SANTOS				
	Name (Printed or typed)				
	11764 W SAMPLE RD STE 102				
	Address				
	CORAL SPRINGS, FL 33065				
	City, State & Zip				
	754-301-2128				
-	Daytime Telephone number				
	INFO@GFSTAXACCT.COM				
_	E-mail address: (to be used	for future annual report r	otification)		

NOTE: Please provide the original and one copy of the articles.



4230002997943

ARTICLES OF INCORPORATION

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

TICLE I NAME TICLE II PRIN	CIPAL OFFICE		
	Principal street address		dress, if different is:
73 SW 8TH ST.	100	<u>9273 SW 8TH ST.</u>	
CA RATON FL 33	128	BOCA RATON FL	33428
TICLE III DUBI	ACE		
<u>'TICLE III PURP</u> e purpose for which	the corporation is organized is:		
NY AND ALL LAV			
		<u></u>	
			
			·
TIÇLE IV SHAR	PES		
number of shares of	stock is: 1,000	_	
number of shares o	Stock is: 1,000		
e number of shares of			
trumber of shares of	AL OFFICERS AND/OR DIRECTOR	<u>ស</u>	
trumber of shares of	AI. OFFICERS AND/OR DIRECTOR e: Marlon Veira Cassimiro de Oliveira -	<u>ស</u>	
trumber of shares of	41. OFFICERS AND/OR DIRECTOR e: Marlon Veira Cassimiro de Oliveira	Resident Name and Title:	
TICLE V INITE Name and Title	e: Marlon Veira Cassimiro de Oliveira - 9273 SW 8TH ST,	RS President Name and Title:	
TICLE V INITE Name and Title	41. OFFICERS AND/OR DIRECTOR e: Marlon Veira Cassimiro de Oliveira	RS President Name and Title:	
TICLE V INITE Name and Title	e: Marlon Veira Cassimiro de Oliveira - 9273 SW 8TH ST,	RS President Name and Title:	
TICLE V INITE Name and Title	e: Marlon Veira Cassimiro de Oliveira - 9273 SW 8TH ST,	RS President Name and Title:	
e number of shares of TICLE V INITE Name and Tite Address	e: Marlon Veira Cassimiro de Oliveira - 9273 SW 8TH ST,	RS President Name and Title: Address:	
TICLE V INITE Name and Title Address	41. OFFICERS AND/OR DIRECTOR e: Marlon Veira Cassimiro de Oliveira - 9273 SW 8TH ST, BOCA RATON FL 33428	President Name and Title: Address: Name and Title:	
e number of shares of TICLE V INITE Name and Tite Address	41. OFFICERS AND/OR DIRECTOR e: Marlon Veira Cassimiro de Oliveira - 9273 SW 8TH ST, BOCA RATON FL 33428	President Name and Title: Address: Name and Title:	
TICLE V INITE Name and Title Address	41. OFFICERS AND/OR DIRECTOR e: Marlon Veira Cassimiro de Oliveira - 9273 SW 8TH ST, BOCA RATON FL 33428	President Name and Title: Address: Name and Title:	
TICLE V INITE Name and Title Address	41. OFFICERS AND/OR DIRECTOR e: Marlon Veira Cassimiro de Oliveira - 9273 SW 8TH ST, BOCA RATON FL 33428	President Name and Title: Address: Name and Title:	
TICLE V INITE Name and Title Address	41. OFFICERS AND/OR DIRECTOR e: Marlon Veira Cassimiro de Oliveira - 9273 SW 8TH ST, BOCA RATON FL 33428	President Name and Title: Address: Name and Title:	
e number of shares of TICLE V INITL Name and Title Address Name and Title Address	AJ. OFFICERS AND/OR DIRECTOR e: Marlon Veira Cassimiro de Oliveira - 9273 SW 8TH ST, BOCA RATON FL 33428	Name and Title: Name and Title: Name and Title: Address: Name and Title: Address: Address:	
e number of shares of TICLE V INITL Name and Title Address Name and Title Address	41. OFFICERS AND/OR DIRECTOR e: Marlon Veira Cassimiro de Oliveira - 9273 SW 8TH ST, BOCA RATON FL 33428	Name and Title: Name and Title: Name and Title: Address: Name and Title: Address: Address:	
TICIE V INITI Name and Title Address Name and Title Address	AJ. OFFICERS AND/OR DIRECTOR e: Marlon Veira Cassimiro de Oliveira - 9273 SW 8TH ST, BOCA RATON FL 33428	President Name and Title: Address: Name and Title: Address: Name and Title:	
e number of shares of TICLE V INITL Name and Title Address Name and Title Address	AJ. OFFICERS AND/OR DIRECTOR e: Marlon Veira Cassimiro de Oliveira - 9273 SW 8TH ST, BOCA RATON FL 33428	President Name and Title: Address: Name and Title: Address: Name and Title:	SECRETALLA
TICIE V INITI Name and Title Address Name and Title Address	AJ. OFFICERS AND/OR DIRECTOR e: Marlon Veira Cassimiro de Oliveira - 9273 SW 8TH ST, BOCA RATON FL 33428	President Name and Title: Address: Name and Title: Address: Name and Title:	SEGRETIARY TALLAHAS
TICIE V INITI Name and Title Address Name and Title Address	AJ. OFFICERS AND/OR DIRECTOR e: Marlon Veira Cassimiro de Oliveira - 9273 SW 8TH ST, BOCA RATON FL 33428	President Name and Title: Address: Name and Title: Address: Name and Title:	SECRETALLA

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Name and Title:		Name and Title:	
Address		Address:	_
			_
			_
	EEGISTERED AGENT orida street address (P.O. Box NOT acceptable) of the registered agent is:	
Name:	GILVAM DOS SANTOS		
Address:	11764 W SAMPLE RD STE 102	<u></u>	
	CORAL SPRINGS, FL 33065		
ARTICLE VII 1	NCORPORATOR		
The name and add	dress of the Incorporator is:		
Name:	GILVAM DOS SANTOS		
Address:	11764 W SAMPLE RD STF 102		
	CORAL-SPRINGS, FL 13065		
Effective date, if o	EFFECTIVE DATE: other than the date of filing: tte is listed, the date must be specific and car	OPTIONAL) nnot be more than five days prior or 90 days after the	
	inserted in this block does not meet the applical fective date on the Department of State's record	ble statutory filing requirements, this date will not be fisted ds.	as
	ed as registered agent to accept service of process millar with and accept the appointment as regis		this
C	0	×129/23	_
	Required Signature/Registered Agent	Date	
	iment and affirm that the facts stated herein a epartment of State Constitutes a third degree fel	ire (rue. I am aware that the false information submitted it lany as provided for in s.817.155. F.S.	n a
	7 - (-/	
Required Signatur	e/Incorporator	Date 2/29/23	
		SECRETALL	•

023 AUG 29 AM 9: 4:9 ECRETARY OF STATE