

P24000005676

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

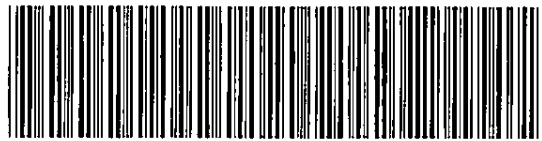
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
2024 JAN 23 PM 4:55  
JAN 23 2024

RECEIVED  
2024 JAN 23 AM 10:49  
JAN 23 2024

FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
(850) 524-5437  
(850) 524-624

PLEASE USE FUNDS FROM THIS ACCOUNT: I20210000160: \$78.75

AUTHORIZATION SIGNATURE: \_\_\_\_\_

*Jan Furr*

Contempo USA, Inc.

BUSINESS

Document

\_\_\_ Walk in

\_\_\_ Pick up time \_\_\_

\_\_\_ Mail out

\_\_\_ Will wait

\_\_\_ Certified copy of articles of

\_X\_ Certificate of Status

**NEW FILINGS**

\_\_\_ Profit  
\_\_\_ Not for Profit  
\_\_\_ Limited Liability  
\_\_\_ Domestication  
\_\_\_ Other

\_X\_ CORP

**AMMENDMENTS**

\_\_\_ Amendment  
\_\_\_ Resignation of R.A. Officer/Director  
\_\_\_ Change of Registered Agent  
\_\_\_ Dissolution/Withdrawal  
\_\_\_ Merger  
\_\_\_ Conversion

**OTHER FILINGS**

\_\_\_ Annual Report  
\_\_\_ Fictitious

\_\_\_ APOSTIL ( ) \_\_\_\_\_  
Country

**REGISTRATION/QUALIFICATIONS**

\_\_\_ Foreign filing  
\_\_\_ Limited Partnership  
\_\_\_ Reinstatement

\_\_\_ Other

EXAMINER'S INITIALS: \_\_\_\_\_

## COVER LETTER

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

**SUBJECT:** CONTEMPO USA INC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00      ☒ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

**FROM:** FABIO PIZELMAN  
Name (Printed or typed)

8004 NW 154 STREET, SUITE 210  
Address

MIAMI LAKES, FL 33016  
City, State & Zip

786-710-6923  
Daytime Telephone number

CONTEMPOUSA.FURNISHINGS@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

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

**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: CONTEMPO USA INC

**ARTICLE II PRINCIPAL OFFICE**

Principal **street** address

Mailing address, if different is:

8004 NW 154 STREET, SUITE 210

MIAMI LAKES, FL 33016

**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: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: ALEXANDER PETRUZZELLI - P

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

Address 8004 NW 154 STREET, SUITE 210

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

MIAMI LAKES, FL 33016

Name and Title: FABIO PIZELMAN - S

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

Address 8004 NW 154 STREET, SUITE 210

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

MIAMI LAKES, FL 33016

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

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

Address \_\_\_\_\_

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

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2024 JAN 23 PM 4:55  
ALLIANCE

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: MATTHEW R. SIMRING  
Address: 2750 TAYLOR AVE, SUITE A-10  
ORLANDO, FL 32806

**ARTICLE VII INCORPORATOR**

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

Name: FABIO PIZELMAN  
Address: 8004 NW 154 STREET, SUITE 210  
MIAMI LAKES, FL 33016

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 1/23/2024. (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*

Matthew R. Simring

Required Signature/Registered Agent

1/23/2024

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.*

Fabio Pizelman

Required Signature/Incorporator

1/23/2024

Date