

P24000015203

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H24000079467 3)))



H240000794673ABC6

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From:
Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : 120000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
CARDOSO 89 CORP**

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

Electronic Filing Menu

Corporate Filing Menu

Help

2013 FEB 28 PM 3:31

2013 FEB 28 PM 3:31

SECRET
TALLAHASSEE, FLORIDA

FILED

Handwritten signature/initials

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:Candoso 89 corp**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

240 Sombrero beachRD APT 4 H
MARATHON FL 33050**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Yoilan Morales Candoso (P)
240 Sombrero beach RD APT 4 H
MARATHON FL 33050**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:


Yoilan Morales Candoso
240 Sombrero beach RD APT 4 H
MARATHON FL 33050**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Yoilan Morales Candoso
240 Sombrero Beach Rd
Apt 4H Marathon FL 33050SECRET
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 02-23-2013 BY 60322

FEB 23 2013 3:33 PM

FILED

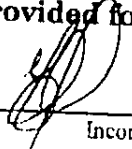
Required Signatures:

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



Registered Agent_____
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.



Incorporator_____
Date**FILED**FEB 27 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA