

**PA 400025136**

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.

((H24000130523 3)))



H240001305233ABCU

**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 : AT PLUS CORP  
Account Number : I201400000060  
Phone : (305)406-3800  
Fax Number : (305)406-3999

**\*\*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  
BROWNSVILLE GROUP ENTERPRISES INC**

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

SECRETARY OF STATE  
FLORIDA

2024 APR 10 AM 11:17

2024 APR 10 AM 11:17

**FILED**

Electronic Filing Menu

Corporate Filing Menu

Help

T.S.H  
4/11/24

15

## **AFFIDAVIT**

BEFORE ME, the undersigned authority, on this day personally appeared, who after being firstly duly sworn, under oath, deposes and says:

1. The undersigned is also the sole Director and the President of **BROWNSVILLE GROUP ENTERPRISES INC**, a Florida corporation to be filed with the Florida Department of State on or about **April 4, 2024**.
2. The undersigned hereby consents to and authorizes the use by **BROWNSVILLE GROUP ENTERPRISES INC**, of the name **BROWNSVILLE GROUP ENTERPRISES INC**.
3. The undersigned has personal knowledge of the fact and matter set forth herein and therefore has no intentions of reinstating the dissolved entity.

FURTHER AFFIANT SAYETH NAUGHT.

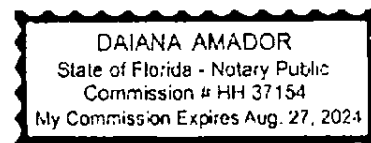
  
\_\_\_\_\_  
RAED ELAYEM

STATE OF FLORIDA           )  
  ) SS:  
COUNTY OF MIAMI-DADE )

PERSONALLY appeared before me, Rigoberto Moreno, who is personally known to me, who being by my first duly sworn, acknowledges that he signed the foregoing for the purposes therein expressed.

Witness my hand and official seal this 4<sup>th</sup> day of April, 2024

  
\_\_\_\_\_  
Notary Public Signature



**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: BROWNsville Group Enterprises INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal ~~street~~ address  
4701 NW 27<sup>th</sup> Ave  
MIAMI, FL 33142

Mailing address, if different is:  
4701 NW 27<sup>th</sup> Ave  
MIAMI, FL 33142

**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: 100

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

Name and Title:	<u>RAED ETAYEM / President</u>	Name and Title:	_____
Address	<u>4701 NW 27<sup>th</sup> Ave</u>	Address:	_____
	<u>MIAMI, FL 33142</u>		_____
	_____		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____
	_____		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____
	_____		_____

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: RAED Etayem  
Address: 4701 NW 27<sup>th</sup> Ave  
MIAMI, FL 33142

**ARTICLE VII INCORPORATOR**The **name and address** of the Incorporator is:

Name: Raed Etayem  
Address: 4701 NW 27<sup>th</sup> Ave  
MIAMI, FL 33142


**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (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:*

 04/09/24  
Required Signature/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.*

 04/09/24  
Required Signature/Incorporator Date