

P24000044276

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.

((H24000227076 3)))



H240002270763ABC/

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 : RCA ACCOUNTING SERVICES CORP
Account Number : I20180000102
Phone : (305)759-7633
Fax Number : (305)564-6857

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

Email Address: _____

RECEIVED

2024 JUL -2 PM 4:57

REGISTRATION
DIVISION
CORPORATIONS
FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION

Cap Trader Corp

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

MS

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 Cap Trader Corp

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

8180 NW 36TH ST SUITE 409-A, MIAMI, FL 33166

SAME AS PRINCIPAL

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: MARIA CLAUDIA AVALO/P

Address: 8180 NW 36TH ST

SUITE 409-A

MIAMI, FL 33166

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name MARIA CLAUDIA AVALO

Address: 8180 NW 36TH ST SUITE 409-A, MIAMI, FL 33166

ARTICLE VII INCORPORATOR

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

Name: MARIA CLAUDIA AVALO

Address: 8180 NW 36TH ST SUITE 409-A, MIAMI, FL 33166

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

12/ Maria Claudia Avalo

Required Signature/Registered Agent

07/02/24

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.

12/ Maria Claudia Avalo

Required Signature/Incorporator

07/02/24

Date