

P95000057224

TRANSMITTAL LETTER

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

100001550241
-08/01/95--01040--015
****131.25 ****131.25

SUBJECT: Fam Associates, Inc.
(Proposed corporate name - must include suffix)

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

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☒ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM:

Alejandro A. Maduro

Name (printed or typed)

9150 S.W. 78 Street

Address

Miami, Florida 33173

City, State & Zip

(305) 274-0199

Daytime Telephone number

FILED
95 JUL 25 PM 2:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SHARON L. TALA

JUL 21 1995

755 Wnsig ck.
109 W-14316

July 21, 1995

Mrs. Loria Poole
Corporate Specialist
Florida Department of State
Division of Corporations
P.O. BOX 6327
Tallahassee, Florida 32314

Subject: FAM Associates, Inc.
Ref. Number: W95000014316

Dear Mrs. Poole:

Enclosed you will find check #552 in the amount of \$131.25, and a copy of letter # 895A00034109 which was sent to me on July 17, 1995. I believe this will allow you to proceed with the filing of the document previously sent to that agency.

Thank You,

A handwritten signature in dark ink, appearing to read 'Alejandro Maduro', written over a horizontal line.

Alejandro Maduro



FLORIDA DEPARTMENT OF STATE

July 17, 1995

Sandra B. Mortham
Secretary of State

ALEJANDRO A. MADURO
9150 S.W. 78TH ST.
MIAMI, FL 33173

SUBJECT: FAM ASSOCIATES, INC.
Ref. Number: W95000014316

We have received your document for FAM ASSOCIATES, INC. and your check(s) totaling \$. However, the document has not been filed and is being retained in this office for the following:

Please sign and return your check, along with a copy of this letter to ensure your check is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6934.

Loria Poole
Corporate Specialist

Letter Number: 895A00034109

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

FILED
95 JUL 25 PM 2:55
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Fam Associates, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

9240 S.W. 72 Street - Suite 211
Miami, Florida 33173

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: Ten thousand (10,000) shares.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

(A) Address of corporate office:

(1) 9240 S.W. 72 Street - Suite 211
Miami, Florida 33173

(B) Initial registered agent:

(1) Alejandro A. Maduro, social security #: 592-98-6306

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

(A) Alejandro A. Maduro, social security #: 592-98-6306
9150 S.W. 78 street
Miami, Florida 33173

(B) Francisco A. Maduro, social security #: 570-48-1692
12640 S.W. 96 Avenue
Miami, Florida 33176


(C) Ten thousand shares (10,000) at \$1.00 par value
distributed in the following manner:


(1) Alejandro A. Maduro (SS#: 592-98-6306), owner
of 5,000 shares.

(2) Francisco A. Maduro (SS#: 590-48-1692), owner
of 5,000 shares.

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

13th day of July, 19 95.


_____, Alejandro A. Maduro
Signature


_____, FRANCISCO MADURO
Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

Fam Associates, Inc.

2. The name and address of the registered agent and office is:

Alejandro A. Maduro
(NAME)

9240 S.W. 72 Street - Suite 211
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Miami, Florida 33173
(CITY/STATE/ZIP)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



Alejandro A. Maduro
(SIGNATURE)

July 13, 1995
(DATE)

FILED
95 JUL 25 11:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA