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LOCAL REPRESENTATIVE TALLAHASSEE

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-04/27/98--01036--004

****122.50 ****122.50

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. CAREEN DISTRIBUTORS, INC.
(Corporation Name) (Document #)

2. (Corporation Name) (Document #)

3. (Corporation Name) (Document #)

4. (Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2:00

☐ Certified Copy

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☐ Photocopy

☐ Certificate of Status

FILED
98 APR 27 PM 1:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
98 APR 27 AM 11:12
DIVISION OF CORPORATION

NEW FILINGS	
☒	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

K. Rolfe APR 27 1998

Examiner's Initials

ARTICLES OF INCORPORATION

OF

CARFEN DISTRIBUTORS, INC.

FILED
98 APR 27 PM 1:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

ARTICLE I NAME

The name of the corporation shall be:

CARFEN DISTRIBUTORS, INC.

ARTICLE II PRINCIPAL OFFICE

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

2665 W 81 St.
Hialeah, Fl. 33016

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

Sixty (60) shares of NON PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Gabriel Lopez
2665 W 81 St.
Hialeah, Fl. 33016

ARTICLE V INCORPORATOR(S)

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

Gabriel Lopez
2665 W 81 St.
Hialeah, FL. 33016

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

Twenty one day of April 19 98



Signature
Gabriel Lopez

Signature

Signature

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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: CARFEN DISTRIBUTORS, INC.

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

Gabriel Lopez

2665 W 81 St.

Hialeah, Fl. 33016

Signature: 

Title: President

Date: 4-21-98

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

Signature: 

Date: 4-21-98

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