

P98000077185

TRANSMITTAL LETTER

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

200002628982-5
-08/31/98-01083-018
*****78.75 *****78.75

SUBJECT: FAM ENTERPRISES, 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: MARK DIAZ
Name (Printed or typed)

P.O. Box 430265
Address

SOUTH MIAMI, FLORIDA 33243
City, State & Zip

305. 789. 2695
Daytime Telephone number

Mark Diaz GAVE
AUTHORIZATION BY PHONE TO
CORRECT RA. address
DATE 9-8-98
DOC. EXAM 9N

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

98 AUG 31 AM 9:14

FILED

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

9/9-8-98

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: FAM Enterprises, Inc.

ARTICLE II PRINCIPAL OFFICE

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

P.O. Box 430265
S. MIAMI, FL 33243

ARTICLE III SHARES

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

100 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

MARK DIAZ
P.O. Box 430265 6151 Twin Lake Dr.
MIAMI, FLORIDA 33243 South Miami, FL 33143

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Mark Diaz
P.O. Box 430265 6151 Twin Lake Dr.
Miami, FL 33243 South Miami, FL 33143

Signature/Incorporator

Date

(An additional article must be added if an effective date is requested.)

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

Signature/Registered Agent

Date

FILED
98 AUG 31 AM 9:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA