

P99000055896
TRANSMITTAL LETTER

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

000002908500--8
-06/18/99--01024--007
*****78.75 *****78.75

SUBJECT: INVERSIONES LEVY, 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 of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: LUZ M. BAZZOCCHI
Name (Printed or typed)

444 BRICKELL AVE SUITE 51 SECTION 275
Address

MIAMI FL 33131
City, State & Zip

305- 759- 9378
Daytime Telephone number

99 JUN 18 AM 11:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

ajc 6/21

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:

INVERSIONES LEVY, INC

(Levy/Investments)

ARTICLE II PRINCIPAL OFFICE

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

444 BRICKELL AVE SUITE 51 SECTION 275
MIAMI FL. 33131

ARTICLE III SHARES

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

100-

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

LUZ M. BAZZOCCHI
444 BRICKELL AVE SUITE 51 SECTION 275
MIAMI FL. 33131

ARTICLE V INCORPORATOR

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

LUZ M. BAZZOCCHI
444 BRICKELL AVE SUITE 51 SECTION 275

Luz M. Bazzocchi
Signature/Incorporator

6-15-99

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

Luz M. Bazzocchi
Signature/Registered Agent

6-15-99

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Signature/Registered Agent

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Date