

P9900099237

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

800003039248--6
-11/09/99--01029--004
*****70.00 *****70.00

SUBJECT:

E R M D, 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: FRANCESCO CABRERA
Name (Printed or typed)

11880 W BIRD RD. SUITE 218
Address

MIAMI FL. 33175
City, State & Zip

(305) 223-1959
Daytime Telephone number

99 NOV - 9 AM 10:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

DN 11/12/99

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:

ERM D, INC.

ARTICLE II PRINCIPAL OFFICE

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

11880 BIRD ROAD
MIAMI FLORIDA 33175

ARTICLE III SHARES

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

SIX HUNDRED (600)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

FRANCESCO CABRERA
13020 SAN MATEO ST.
CORAL GABLES, FL 33156

ARTICLE V INCORPORATOR

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

FRANCESCO CABRERA
13020 SAN MATEO ST.
CORAL GABLES, FL. 33156

(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

X  Signature/Registered Agent/ INCORPORATOR

10/26/99

Date

FILED
99 NOV -9 AM 10:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA