

TRANSMITTAL LETTER

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

P99000104725

SUBJECT: Jaime Argenal Molieri Corporation  
(Proposed corporate name - must include suffix)

800003055318--6  
-11/29/99--01107--007  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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: Jaime J. Argenal  
Name (Printed or typed)  
9840 S.W. 1CT  
Address  
Plantation, FL 33324  
City, State & Zip  
954-723-9681  
Daytime Telephone number

FILED  
99 NOV 29 PM 5:31  
TALLAHASSEE, FLORIDA

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

AYC  
12-2-99

## 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:

JAIME ARGENAL MOLIERI CORPORATION

### ARTICLE II PRINCIPAL OFFICE

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

9840 S.W. 1CT, Plantation, FL 33324

### ARTICLE III SHARES

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

1,000

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Jaime J. Argenal, 9840 S.W. 1 CT, Plantation, FL 33324

### ARTICLE V INCORPORATOR

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

Jaime J. Argenal, 9840 S.W. 1 CT, Plantation, FL 33324

  
Signature/Incorporator

November 17, 1999

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

November 17, 1999

Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA