

03/23/2023 10:34

(FAX)

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3/23/23, 10:07 AM

Division of Corporations

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : ELO ENTERPRISES, INC
Account Number : 120150000109
Phone : (561)544-8862
Fax Number : (954)697-0130

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: sales@eloenterprises.us

FLORIDA PROFIT/NON PROFIT CORPORATION
COZIMAX FURNITURE CORP.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

23 MAR 23 PM 12:31

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ARTICLES OF INCORPORATION
in compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I - NAMEThe name of the corporation shall be: COZIMAX FURNITURE CORP.**ARTICLE II - PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

4700 NW Boca Raton Blvd #202Boca Raton, FL 33431**ARTICLE III - PURPOSE**The purpose for which the corporation is organized is: Any and all lawful business.**ARTICLE IV - SHARES**The number of shares of stock is: 1000**ARTICLE V - INITIAL OFFICERS AND/OR DIRECTORS**• Name and Title: JANICE FARES - P Name and Title: _____Address 4700 NW Boca Raton Blvd #202 Address: _____Boca Raton, FL 33431• Name and Title: JAIME FARES - VP Name and Title: _____Address 4700 NW Boca Raton Blvd #202 Address: _____Boca Raton, FL 33431• Name and Title: JAMIL FARES - D Name and Title: _____Address 4700 NW Boca Raton Blvd #202 Address: _____Boca Raton, FL 33431

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TALLAHASSEE, FLORIDA

Name and Title: <u>JANETE FARES - D</u>	Name and Title: <u>GUSTAVO DA SILVEIRA GUIMARAES - T</u>
Address: <u>4700 NW Boca Raton Blvd #202</u>	Address: <u>4700 NW Boca Raton Blvd #202</u>
<u>Boca Raton, FL 33431</u>	<u>Boca Raton, FL 33431</u>
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: ELO ENTERPRISES, INC.

Address: 4700 NW Boca Raton Blvd #202

Boca Raton, FL 33431

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: JANICE FARES

Address: 4700 NW Boca Raton Blvd #202

Boca Raton, FL 33431

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

[Signature]

Required Signature/Registered Agent

02/21/2023

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in § 817.155, F.S.

[Signature]

Required Signature/Incorporator

Date

02/21/2023

Date

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