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### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Grupo Norte, I	w.
Name of corporation - must i	nclude suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorit" "Certificate of Existence," or "Certificate of Good Standing" at above referenced foreign corporation to transact business in Flo	nd check are submitted to register the
Please return all correspondence concerning this matter to the f	•
Reynaldo J. Alfo	nso
Reynaldo J. Alfo Name of Person	_
Grupo Noste	.Inc.
Firm/Company	
PO BOX 361669	
Name of Person  Grupo Norte  Firm/Company  PO BOX 361669  Address  San Juan, P.  City/State and Zip of	R 00936
City/State and Zip c	ode
ralfons of acuponottepr.  E-mail address: (to be used for future	Lom
E-mail address: (to be used for futur	e annual report notification)
For further information concerning this matter, please call:	
Reynaldo J. Alfonso at (787)  Name of Person Area Code	701-0909
Name of Person Area Code	Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
<del>_</del>	5 Filing Fee & Section Status & Certified Copy

#### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO

REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. Grupo Norte, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. Puerto Rico
(State or country under the law of which it is incorporated)

(FEI number, if applicable) 4. January 2.2013

(Date of incorporation)

5. (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) GQ-19 Ave. Roberto Sanchez Vilella, Carolina PR 00982
(Principal office address) BOX 341669 San Juan PR 00936
(Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Sonia Teresa Rodríquez Name: 5957 Bent Pine Dr. Apt. 1137
Orlando , Florida 32822
(Zip code)

9. Registered agent's acceptance:

Office Address:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

Vice President:  Address:		<del></del>
Address: PO BOX 361669 SAN Jun PR 00936  Vice Chairman: Address:  Director: Address:  B. OFFICERS  President: Reynaldo J. Alfonso Address: PO BOX 361669 SAN JUAN PR 00936  Vice President: Address:		
Address:  Director: Address:  Director: Address:  B. OFFICERS  President: Reynoldo J. Alfonso  Address: PO BOX 361669 San Juan PR 00936  Vice President: Address:		
Director:  Address:  Director:  Address:  B. OFFICERS  President:  Reynaldo J. Alfonso  Address:  PO Box 361669 San Juan PR 00936  Vice President:  Address:		
Director:  Address:  Director:  Address:  B. OFFICERS  President:  Reynoldo J. Alfonso  Address:  PO BOX 361669 San Juan PR 00936  Vice President:  Address:		  
Director:  Address:  B. OFFICERS  President: Reynoldo J. Alfonso  Address: PO BOX 361669 San Juan PR 00936  Vice President:  Address:		_ _ _ _
B. OFFICERS  President: Reynaldo J. Alfonso  Address: PO BOX 361669 San Juan PR 00936  Vice President:  Address:		
B. OFFICERS  President: Reynaldo J. Alfonso  Address: PO Box 361669 San Juan PR 00936  Vice President:  Address:		<u> </u>
B. OFFICERS  President: Reynoldo J. Alfonso  Address: PO BOX 361669 San Juan PR 00936  Vice President:  Address:		
Address:	<b></b>	<u> </u>
Address:	<u>।</u> उ	<u>.</u> [] -,
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Secretary:	) 38 % 32 % 3	21/1
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Address:		
Treasurer: Reynaldo J. Alfonso  Address: PO Box 361669 San Juan PR 00936		_
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors	••	
Signature of Director or Officer  The officer or director signing this document (and who is listed in number 11 above) affirms that the facts are true and that he or she is aware that false information submitted in a document to the Department of the earth of the e	TISH LOC	- 35
(Typed or printed name and capacity of person signing application)  (Typed or printed name and capacity of person signing application)  (REG.)  (Common of Public P	AL	



## Commonwealth of Puerto Rico **DEPARTMENT OF STATE**San Juan, Puerto Rico

#### **CERTIFICATE OF GOOD STANDING**

I, **VÍCTOR A. SUÁREZ MELÉNDEZ, Secretary of State** of the Commonwealth of Puerto Rico,

**CERTIFY:** That, **GRUPO NORTE, INC.**, register number **306873**, a **for profit domestic** corporation, organized under the laws of Puerto Rico on **January 2, 2012**, has complied with the filing of its Annual Reports.



IN WITNESS WHEREOF, the undersigned by virtue of the authority vested by law, hereby issues this certificate and affixes the Great Seal of the Commonwealth of Puerto Rico, in the City of San Juan, Puerto Rico, today, October 11, 2016.

VÍCTOR A. SUÁREZ MELÉNDEZ Secretary of State

To validate this certificate go to:

http://estado.pr.gov/

This certificate can be validated an unlimited number of times before its expiration date of 11-Oct-2017.

Certificate Validation Number: 180107-97856280



## Commonwealth of Puerto Rico DEPARTMENT OF STATE San Juan, Puerto Rico

### **CERTIFICATE OF EXISTENCE**

I, VÍCTOR A. SUÁREZ MELÉNDEZ, Secretary of State of the Commonwealth of Puerto Rico,

**CERTIFY:** That, **GRUPO NORTE**, **INC.**, registry number **306873**, is a **domestic for profit corporation**, organized on **January 2**, **2012**, in accordance to the General Corporations Law, as amended.

This certification does not certify that this corporation has filed its annual reports, pursuant to the requirements of the General Corporations Law, as amended. If you need to know if such reports have been filed, you must request a Certificate of Good Standing.



**IN WITNESS WHEREOF**, the undersigned by virtue of the authority vested by law, hereby issues this certificate and affixes the Great Seal of the Commonwealth of Puerto Rico, in the City of San Juan, Puerto Rico, today, **September 30, 2016**.

as

VÍCTOR A. SUÁREZ MELÉNDEZ Secretary of State

To validate this certificate go to:

http://estado.pr.gov/

This certificate can be validated an unlimited number of times before its expiration date of 30-Sep-2017.

Certificate Validation Number: 178244-38795826