F16000005233

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	s of Status			
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NOV 2 8 2016 Y SULKER



W16-77599



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 16, 2016

CHRISTIAN GUZMAN 1395 BRICKELL AVE STE 800 MIAMI, FL 33131

SUBJECT: DEVONSHIRE HOLDINGS INTERNATIONAL, LTD.

Ref. Number: W16000077599

We have received your document for DEVONSHIRE HOLDINGS INTERNATIONAL, LTD.. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$70.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

The use of LIMITED or LTD. is not sufficient as a corporate designation. The name must include a word such as INCORPORATED, INC., CORPORATION or CORP.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 816A00024606

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJ	DEVONS:	HIRE HOLDINGS	INTERNATIO	NAL, LTD CO	
5020		Name o	of corporation	- must include suffix	
Dear S	ir or Madam:				
"Certif	• •	," or "Certificate	of Good Stan	ding" and check are sub	ct Business in Florida," omitted to register the
	return all corresp IAN GUZMAN LE		ng this matter	to the following:	
			Name of I	Person	
JP GL	OBAL BUSINESS	SOLUTIONS INC			
1395 E	BRICKELL AVE ST	E 1380	Firm/Com	pany	
			Addre	SS	
MIAM	II, FL 33131				
INFO	@JPGBUSINESS.C	ОМ	City/State at	nd Zip code	
		E-mail address	: (to be used f	or future annual report	notification)
For fu	rther information	concerning this m	atter, please c	all:	
JOSE	PEREZ		305	3593700	
	Name of Person	1	Area Code	Daytime Telep	hone Number
Enclos	STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	Center Circle 32301		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7
= \$79	0.00 Filing Fee	□ \$78.75 Filing Certificate of		\$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certificate of 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.

(If name unavaila	able in Florida, enter alternate corporate name adop	ted for the purpose of transacting	ng business in Florida)
BRITISH VIRG 2.	2		
(State or countr 08/18/2016	y under the law of which it is incorporated) 5	(FEI number, if ap	
	of incorporation)	(Date of duration, if other	than perpetual)
5			
	(Date first transacted business in Flo (SEE SECTIONS 607.1501 & 607.1502,		lity)
1395 BRICKELL 7.	. AVE STE 800 MIAMI, FL 33131		
	(Principal of	fice address)	NON SE
	(Current mailing ad	dress, if different)	\$5EE
3. Name and stree	et address of Florida registered agent: (P.O. Be	ox NOT acceptable)	F STA
Name:	JP GLOBAL BUSINESS SOLUTIONS, INC	_	5
Office Address:	1395 BRICKELL AVE STE 1380		
	MIAMI	33131 _ , Florida	
	(City)	(Zip code)	
Having been nam designated in this further agree to c	ent's acceptance: ned as registered agent and to accept service of application, I hereby accept the appointment omply with the provisions of all statutes relate familiar with and accept the obligations of my	t as registered agent and ag ive to the proper and compl	ree to act in this capacity. lete performance of my

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:

CRISTIAN GUZMAN LENCINA	
1395 BRICKELL AVE STE 800 MIAMI, FL 33131	
Chairman:	
s:	
pr:	
s:	
or:	
s:	
FFICERS	76 16
CRISTIAN GUZMAN LENCINA	MO ₁
1395 BRICKELL AVE STE 800 MIAMI, FL 33131	SSEE 22
	7. 2 177
resident:	RED.
es:	
ary:	
ss:	
rer:	
SS:	
E: If necessary, you may attach an addendum to the appl	
Signature of Direct	
ficer or director signing this document (and who is listed and that he or she is aware that false information submagree felony as provided for in s.817.155, F.S.	
CRISTIAN GUZMAN LENCINA	

(Typed or printed name and capacity of person signing application)