



## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ALASTOUR 2013 C.A CORP

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

ISABEL MARTINEZ

Name of Person

CHARM CONSULTING

Firm/Company

1825 MAIN STREET

Address

WESTON, FLORIDA 33326

City/State and Zip code

ISABELRMARTINEZ@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ISABEL MARTINEZ

at ( 754 ) 234-3393

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:

- \$70.00 Filing Fee     \$78.75 Filing Fee & Certificate of Status     \$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.

1. ALASTOUR 2013 C.A. CORP
(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. VENEZUELA 3.
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. FEBRUARY 26, 2015 5. 50 YEARS
(Date of incorporation) (Date of duration, if other than perpetual)

6. N/A
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. CALLE ALTOS DE LOS PINOS, EDF LA PIEDAD PISO 3 OFF 3 URB LOS PINOS, EL HATILLO CARACAS VENEZUELA 1083

(Principal office address)

CALLE ALTOS DE LOS PINOS, EDF LA PIEDAD PISO 3 OFF 3 URB LOS PINOS, EL HATILLO CARACAS VENEZUELA 1083

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CHARM CONSULTING LLC

Office Address: 1825 MAIN STREET

WESTON, Florida 33326
(City) (Zip code)

FILED
2019 FEB 28 AM 10:06
STATE OF FLORIDA

9. Registered agent's acceptance:

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.

[Handwritten signature]

(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:

**A. DIRECTORS**

Chairman: LUIS ENRIQUE ALAS MENDEZ

Address: 1825 MAIN STREET, WESTON FLORIDA 33326

Vice Chairman: ELENA COROMOTO FERNANDEZ RODRIGUEZ

Address: 1825 MAIN STREET, WESTON FLORIDA 33326

Director: ROBERTO ANTONIO CAVO ROMERO

Address: 1825 MAIN STREET, WESTON FLORIDA 33326

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: LUIS ENRIQUE ALAS MENDEZ

Address: 1825 MAIN STREET, WESTON FLORIDA 33326

Vice President: ROBERTO ANTONIO CAVO ROMERO

Address: 1825 MAIN STREET, WESTON FLORIDA 33326

Secretary: ELENA COROMOTO FERNANDEZ RODRIGUEZ

Address: 1825 MAIN STREET, WESTON FLORIDA 33326

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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2019 FEB 28 AM 10:06  
U.S. DEPARTMENT OF STATE

**NOTE:** If necessary, you may attach an addendum to this application listing additional officers and/or directors.

12. \_\_\_\_\_  
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

ROBERTO ANTONIO CAVO ROMERO, VICEPRESIDENT

13. \_\_\_\_\_  
(Typed or printed name and capacity of person signing application)

*Certificate of Translation*

Before me on this day personally appeared Brunella Bellemo a member of the American Association of Translators (ATA), No. 242154, who being duly sworn deposes and says:

I am fluent in both English and Spanish.

I certify that I have accurately translated the attached document(s) from Spanish into English.



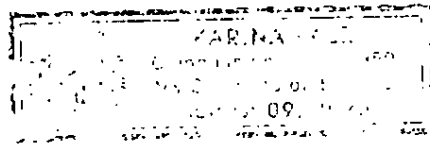
Brunella Bellemo

State of Florida            }  
County of Broward        }

Sworn to and subscribed before me this *20* Day of *February* 2019 by Brunella Bellemo who is personally known



*Notary Public*





VOUCHER No. 201801U0000037884142

**UNIQUE TAX INFORMATION REGISTER (RIF)**

J405670177 ALASTOUR 2013, C.A.

REGISTRATION DATE: 04/102015

LAST UPDATE DATE: 06/15/2018

EXPIRATION DATE: 06/15/2021

**LEGAL ADDRESS:** CALLE ALTOS LOS PINOS - EDIF. LA PIEDAD PISO 3 OFIC. 3  
URB. LOS PINOS – EL HATILLO – CARACAS (EL HATILLO MIRANDA)  
ZIP CODE 1083

**UNIT OF SPECIAL TAXPAYERS**  
BARUTA

3405670177-0XQ (Bar Code)  
**AUTHORIZED SIGNATURE**

**Condition: Ordinary Taxpayer of the VAT and VAT Retention Agent:** The condition of this taxpayer requires the retention of 75% of the tax caused, except if it incurs in the assumptions established for the retention of 100%.

The validity of this voucher must be verified through the address: [www.seniat.gob.ve](http://www.seniat.gob.ve), online system through the option "Digital Consultation RIF" (*Sistemas en Linea mediante la opcion "Consulta Comprobante Digital RIF"*). It does not require wet seal.



**REGISTRO ÚNICO DE INFORMACIÓN FISCAL (RIF)**

J405670177 ALASTOUR 2013.C.A.

FECHA DE INSCRIPCIÓN: 10/04/2015

DOMICILIO FISCAL CALLE ALTOS LOS PINOS EDIF LA PIEDAD PISO 3 OF 3 URB  
LOS PINOS EL HATILLO CARACAS (EL HATILLO MIRANDA ZONA POSTAL 1083

FECHA DE ÚLTIMA ACTUALIZACIÓN: 15/06/2018

FECHA DE VENCIMIENTO: 15/06/2021

UNIDAD DE CONTRIBUYENTES ESPECIALES  
BARUTA

3405670177-OXQ  
FIRMA AUTORIZADA



**Condición: Contribuyente Ordinario del IVA y Agente de Retención del IVA:** La condición de este contribuyente requiere la retención del 75% del impuesto causado, salvo que incurra en los supuestos establecidos para la retención del 100%.

La validez de este Comprobante debe verificarse a través de la dirección [www.seniat.gob.ve](http://www.seniat.gob.ve), Sistemas en Línea mediante la opción 'Consulta Comprobante Digital RIF'. No requiere sello húmedo.