

P13000047200

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

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13 MAY 30 PM 1:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: _____

INV 62200

FLORIDA PROFIT/NON PROFIT CORPORATION
MAGNACON ENERGY INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

RECEIVED
13 MAY 30 PM 4:42
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DIVISION OF CORPORATIONS
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May 20, 2013

FLORIDA DEPARTMENT OF STATE
Division of Corporations

EMPIRE

SUBJECT: MAGNACON ENERGY INC.
REF: W13000029179

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6052.

Pamela Smith
Regulatory Specialist II

FAX Aud. #: H13000111340
Letter Number: 613A00012513

J
P.O. BOX 6327 - Tallahassee, Florida 32314

H1300011340

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

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13 MAY 30 PM 1:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME
The name of the corporation shall be: MAGNACON ENERGY INC.

ARTICLE II PRINCIPAL OFFICE
Principal street address
12500 SW 6 ST. #N110
PEMBROKE PINES, FL 33027

Mailing address, if different is:
SAME

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: OIL CONSTRUCTION, SHIPPING, BROKERS
AND MINERALS.

ARTICLE IV SHARES
The number of shares of stock is: 20 @ \$500.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: P-CONASCON INGENIERIA SAS Name and Title: _____
Address: CR 54 #68-198 OFC. 422 Address: _____
BARRANQUILLA, COLOMBIA

Name and Title: VP- MAGNASEA CAPITAL INVESTMENT Name and Title: _____
Address: 630 FIRST AVE, #29L Address: _____
NEW YORK, NEW YORK 10016

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

(cont.)

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Name and Title: _____ Name and Title: 13 MAY 30 PM 1:29
 Address _____ Address: SECRETARY OF STATE
 _____ TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: NORA ROSADO
 Address: 12500 SW 6 ST, #N 110
PEMBROKE PINES, FL 33027

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JAIME ESPINOSA
 Address: 630 FIRST AVE, #29L
NEW YORK, NEW YORK 10016

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

Nora Rosado
Required Signature/Registered Agent

05-17-2013
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 s.817.155, F.S.

Jaime Espinosa
Required Signature/Incorporator

05-17-2013
Date