

Florida Department of State
 Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
WANDERBEAN INC.**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

JAN 23 2017

K. Brumbley

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COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Wanderbean Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Paul L. Giance CPA

Name (Printed or typed)

9100 NW 36 Street, #105

Address

Doral, FL 33178

City, State & Zip

305-593-2112

Daytime Telephone number

Tobias.breitschaffer@ecualem.com

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

NOTE: Please provide the original and one copy of the articles.

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TALLAHASSEE, FLORIDA

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

ARTICLE I NAME Wanderbean Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address Mailing address, if different is:
10777 NW 84 LN # 7
Doral, FL 33178

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Import and distribution of coffee beans and products and other legal trades or businesses.

ARTICLE IV SHARES 1000 shares of common stock
The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	Allcia Sorber Gallegos President	Name and Title:	Jaime Recalde Vice President
Address	889 Date Street #118 San Diego, CA 92101	Address:	Camerloherstr. 69a 80689 München, Germany
Name and Title:	Tobias Breitscheffer: Treasury/Sec.	Name and Title:	
Address	Nagelbachstr. 24, 83734 Hausham, Germany	Address:	
Name and Title:		Name and Title:	
Address		Address:	

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

ARTICLE VI REGISTERED AGENT

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

Name: Paul L. Glance CPA
 Address: 9100 NW 36 Street, #105
 Doral, FL 33178

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Paul L. Glance CPA
 Address: 9100 NW 36 Street, #105
 Doral, FL 33178

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

Paul L Glance Required Signature/Registered Agent 1/22/2017 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.

Paul L Glance CPA Required Signature/Incorporator 1/22/2017 Date

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