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

From: Account Name : FANJUL ENTERPRISES LLC
Account Number : I20190000088
Phone : (305)603-8791
Fax Number : (877)503-6086

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

Email Address: _____

FILED
 19 DEC -3 PM 2:19
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION
ALVR USA CORP

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

2019-12-03 14:19:19

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

ALVR USA CORP

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

7640 DICKENS AVE APT 3 _____

MIAMI BEACH, FL 33141 _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ANY AND ALL LAWFULL PURPOSES

ARTICLE IV SHARES

1000

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ANTONELLA L VERON ROMERO-P

Name and Title: _____

Address 7640 DICKENS AVENUE APT 3

Address: _____

MIAMI BEACH, FL 33141

Name and Title: _____

Name and Title: _____

Address _____

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: ANTONELLA L VERON ROMERO
 Address: 7640 DICKENS AVENUE APT 3
MIAMI BEACH, FL 33141

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

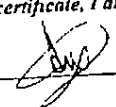
Name: ANTONELLA L VERON ROMERO
 Address: 7640 DICKENS AVENUE APT 3
MIAMI BEACH, FL 33141

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

X  _____ 11/22/2019
 Required Signature/Registered Agent 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.

X  _____ 11/22/2019
 Required Signature/Incorporator Date