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Florida Department of State  
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FLORIDA PROFIT/NON PROFIT CORPORATION  
AVANTI GLOBAL SERVICES INC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: AVANTI GLOBAL SERVICES INC

ARTICLE II PRINCIPAL OFFICE

Principal street address: 6560 NW 114 AVE APT 531
Mailing address, if different is: DORAL, FL 33178

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Pietro Antonio Minicozzi Fiorilli (P)
Address: 6560 NW 114 AVE APT 531 DORAL, FL 33178

Name and Title: Irina Azucena Minicozzi Martinez (VP)
Address: 6560 NW 114 AVE APT 531 DORAL, FL 33178

Name and Title:
Address:

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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: Pietro Antonio Minicozzi Fiorilli  
 Address: 6560 NW 114 AVE APT 531  
MIAMI, FL 33178

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 TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Pietro Antonio Minicozzi Fiorilli  
 Address: 6560 NW 114 AVE APT 531  
MIAMI, 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*

Pietro Antonio Minicozzi Fiorilli 12/4/2019  
 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.*

Pietro Antonio Minicozzi Fiorilli 12/4/2019  
 Required Signature/Incorporator Date