

P20000066336
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H20000298674 3)))



H200002986743ABC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From:
Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
GARCIA DURANY CORPORATION

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

RECEIVED

2029 AUG 27 PM 4: 34

REGISTRATION
FEE
RECEIVED

FILED

2020 AUG 27 PM 4: 47

FILED

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

GARCIA DURANY CORPORATION

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

DELVISTA BUILDING TOWER II

20355 NORTH EAST 34 CT UNIT 1122

AVENTURA, FL 33180

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

P - JUAN PABLO DURANY

VP - SANTIAGO MARTIN GARCIA

D - EDUARDO MADE

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

EDUARDO MADE

DELVISTA BUILDING TOWER II 20355 NORTH EAST 34 CT UNIT 1122

AVENTURA, FL 33180

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

EDUARDO MADE

DELVISTA BUILDING TOWER II 20355 NORTH EAST 34 CT UNIT 1122

AVENTURA, FL 33180

STATE OF FLORIDA
FALL HAVEN, FL 32706

2020 AUG 27 PM 4:47

FILED

Required Signatures:

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

Eduardo Meda

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.

Eduardo Meda

Incorporator

Date