

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.

(((H200003617563)))



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

Account Name : ALEX PINA CO.

Account Number : I20190000095

Phone : (305)803-8471

Fax Number

: (305)602-3977

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

mail	Address:	client@alexpina.co

FLORIDA PROFIT/NON PROFIT CORPORATION

Super Colones Corp

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

Electronic Filing Menu

Corporate Filing Menu

ARTICLES OF INCORPORATION

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

e manie of the corporat	ion shall be: Super Colones (_
RTICLE II PRINCIPAL OFFICE Principal <u>street</u> address 200 E Old Settlers Blvd Unit 913		· · · · · ·	Mailing address, if different is:	
und Rock, TX 78664				
TICLE III PURPO purpose for which the	OSE he corporation is organized is:Any	y and All Lawfull Purpo	05 e	
			Residence of the second	001 19
				k
PTICLE IV SHARI e number of shares of				0: 40
	L OFFICERS AND/OR DIRECTORS			
Name and Title	Osbaldo A Chacin Rincon - President 1200 E Old Settlers Blvd Unit 913	Name and Title: Address:	Ines V Chacin Bolanos - Vicepr 1200 E Old Settlers Blvd Unit 91	
ridings		//		
				
,	Round Rock, TX 78664		Round Rock, TX 78664	
Name and Title: Address				
Address		Address;		
Address		Address: Name and Title:		

Name and Title:		Name and Title:		
Address				
ARTICLE VI REC	<u>GISTERED AGENT</u> la street address (P.O. Box NOT acceptable	e) of the registered agent is:		
Name: _	Alex Pina Co.			
Address:	8400 NW 36th St Ste 450			
_	Doral, FL 33166	<u>.</u>		
ARTICLE VII INC	<u>CORPORATOR</u>		13 OC1 19	
The name and addre	ess of the Incorporator is:		The state of the s	
Name:	Osbaldo A Chacin Rincon			
Address:	1200 E Old Settlers Blvd Unit 913	<u></u>	# A ∏	
	Round Rock, TX 78664	<u></u>	. 47	
	FECTIVE DATE: er than the date of filing: is listed, the date must be specific and ca		r or 90 days after the	
	erted in this block does not meet the applic- tive date on the Department of State's reco		nis date will not be listed as	
	us registered agent to accept service of proce liar with and accept the appointment as reg			
	A Hinder		10/15/2020	
	Required Signature/Registered Agent		Date	
	ent and affirm that the facts stated herein artment of State constitutes a third degree fo			
	Out L		10/15/2020	
Required Signature/I	ncorporator	Date		