

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.

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To:				
	Division of Co	orporations		١٠,
	Fax Number	: (850)617-6381		Ċ
From:				-
	Account Name	: L & R INTERNATIONAL FIRM INC		
	Account Number	r : 120200000026	• `	
	Phone	: (786)413-4344		
	Fax Number	: (305)222-9004		
		r this business entity to be used for Enter only one email address please		ę

FLORIDA PROFIT/NON PROFIT CORPORATION SEASIDE DELIVERY INC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

2021 JAN 26 PM 4: 39

COVER LETTER

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

SUBJECT: SEA	SIDE DELIVERY INC (PROPOSED CORPORAT	E NAME – <u>MÚST INCLU</u>	UDE SUFFIX)			
Enclosed are an or	riginal and one (1) copy of the artic	eles of incorporation and	a check for:			
☑ \$70.00 Filing Fee	☐ S78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Cog & Certificate Status PY REQUIRE	of		
FROM: \	MARIA CAMILA ARIAS					
1 10141.	Name	(Printed or typed)	-			
1	074 NW 13TH ST APT 261C					
_	Α	lddress	<u> </u>			
<u>_</u>	BOCA RATON, FL 33486					
	City.	State & Zip				
<u>(</u>	954) 330 - 6318			. := :	202	
Daytime Telephone number					2021 JAN	****
seasidedelivery08@gmail.com				12.5 S :	1/2	* * *
	E-mail address: (to be used NOTE: Please provide the or	·	ŕ	SEAL SHA	36 PH 4:3	

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

TCLET NAME name of the corpor		RY INC	
•			
RTICLE II PRIN	CIPAL OFFICE Principal street address	!	Mailing address, il different is:
74 NW 13TH ST AP			V 13TH ST APT 261C
DCA RATON, FL		BOCA R	RATON, FL 33486
<u> </u>	<u></u>		
RTICLE III PURI	<u>POSE</u>	NO ALL LANGELIS E	NICHECC
ie purpose for which	the corporation is organized is: ANY A	NO ALL LAVIPOL E	SUSINESS.
	-		
			
			
RTICLE IV SHA	RES		
he number of shares of	of stock is: 1000		
PTICLE V INIT	IAL OFFICERS AND/OR DIRECTORS		
			THE CANADA WAS SECURENT
Name and Ti	tle: MARIA CAMILA ARIAS / PRESIDEN	T Name and Title	RUTH CASANOVA / VICE-PRESIDENT
Address	1074 NW 13TH ST APT 261C	Address:	1074 NW 13TH ST APT 261C
Addicss		Address.	
	BOCA RATON, FL 33486		BOCA RATON, FL 33486
Name and Tit	le:	Name and Title	;
Address		Address:	

			- 3
Name and Tit	le:	Name and Title	200
Address		ومدود المالية	2
Address		Address:	
			87: 2
			
	•		
			39

		H21000035679 3
Name and 7	Fitle:	Name and Title:
Address	<u></u>	Address:
	<u>EGISTERED AGENT</u> ida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	OSCAR LOPEZ	
Address:	8410 W FLAGLER ST STE 205	
	MIAMI, FL 33144	
-	1	•
ARTICLE VII IN	CORPORATOR	
The name and add	ress of the Incorporator is:	
Name:	OSCAR LOPEZ	
Address:	8410 W FLAGLER ST STE 205	
	MIAMI, FL 33144	
Effective date, if of (If an effective data filing.) Note: If the date is the document's effective data is the document's effective data.	Required Signature/Registered Agent ment and affirm that the facts stated herein are partment of State of process for the	statutory filing requirements, this date will not be listed as or the above stated corporation at the place designated in this ed agent and agree to act in this capacity 1. 25. 2021 Date true. I am aware that the false information submitted in a
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