

P22000057265

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

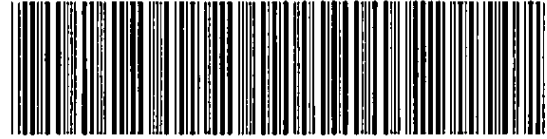
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600391342466

7/19/22 4:25 PM 000 4070.00

S. CHATHAM
JUL 19 2022

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2022 JUL 19 PM 2:55

RECEIVED

22 JUL 19 PM 3:26

RECEIVED

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Pinto Preciado Corporation

- ___ Art of Inc. File _____
- ___ LTD Partnership File _____
- ___ Foreign Corp. File _____
- ___ L.C. File _____
- ___ Fictitious Name File _____
- ___ Trade/Service Mark _____
- ___ Merger File _____
- ___ Art. of Amend. File _____
- ___ RA Resignation _____
- ___ Dissolution / Withdrawal _____
- ___ Annual Report / Reinstatement _____
- ___ Cert. Copy _____
- ___ Photo Copy _____
- ___ Certificate of Good Standing _____
- ___ Certificate of Status _____
- ___ Certificate of Fictitious Name _____
- ___ Corp Record Search _____
- ___ Officer Search _____
- ___ Fictitious Search _____
- ___ Fictitious Owner Search _____
- ___ Vehicle Search _____
- ___ Driving Record _____
- ___ UCC 1 or 3 File _____
- ___ UCC 11 Search _____
- ___ UCC 11 Retrieval _____
- ___ Courier _____

22 JUL 19 PM 3:26

Signature _____

Requested by: SETH

07/19/22

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

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: PINTO PRECIADO CORPORATION

ARTICLE II PRINCIPAL OFFICE

Principal <u>street</u> address <u>2121 PONCE DE LEON BLVD STE 1050</u> <u>CORAL GABLES, FL 33134</u>	Mailing address, if different is: _____ _____
---	---

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 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Jose De Jesus Pinto - PD</u>	Name and Title: <u>Claudia Patricia Preciado - SD</u>
Address: <u>2121 Ponce de Leon Blvd Ste 1050</u> <u>Coral Gables, FL 33134</u>	Address: <u>2121 Ponce de Leon Blvd Ste 1050</u> <u>Coral Gables, FL 33134</u>
Name and Title: <u>Lizette Estefania Pinto - VP</u>	Name and Title: <u>Claudia Jazmin Pinto - VP</u>
Address: <u>2121 Ponce de Leon Blvd Ste 1050</u> <u>Coral Gables, FL 33134</u>	Address: <u>2121 Ponce de Leon Blvd Ste 1050</u> <u>Coral Gables, FL 33134</u>
Name and Title: <u>Jose Alejandro Pinto - VP</u>	Name and Title: _____
Address: <u>2121 Ponce de Leon Blvd Ste 1050</u> <u>Coral Gables, FL 33134</u>	Address: _____

22 JUL 19 PM 3:25

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: Consulting Services of South Florida Inc
Address: 2121 Ponce de Leon Blvd Ste 1050
Coral Gables, FL 33134

ARTICLE VII INCORPORATOR

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

Name: Antonio Garcia
Address: 2121 Ponce de Leon Blvd Ste 1050
Coral Gables, FL 33134

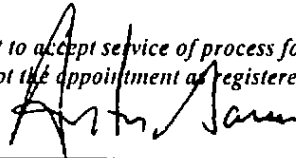
ARTICLE VIII EFFECTIVE DATE:

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

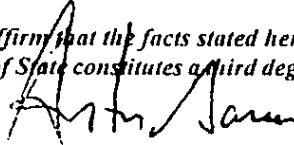


Required Signature/Registered Agent

07-19-2022

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.



Required Signature/Incorporator

07-19-2022

Date

22 JUL 19 PM 3:26