# T13000005285

| (Re                     | equestor's Name)   |           |
|-------------------------|--------------------|-----------|
| (A.                     |                    |           |
| (Ad                     | ldress)            |           |
| (Ad                     | ldress)            |           |
| (Cit                    | ty/State/Zip/Phone | · #)      |
|                         | ·                  |           |
| PICK-UP                 | ☐ WAIT             | MAIL      |
| (Bu                     | isiness Entity Nam | ne)       |
| ·                       | ·                  | ·         |
| (Do                     | ocument Number)    |           |
| Certified Copies        | _ Certificates     | of Status |
|                         |                    |           |
| Special Instructions to | Filing Officer:    | •         |
|                         |                    |           |
|                         | DEC 1 0 2013       |           |
|                         | A. DUNLAP          | •         |
|                         |                    | `         |
|                         |                    |           |

Office Use Only



100254020651

11/21/13--01017--004 \*\*78.75

13 DEC -9 PH 3: 2

N13-14784

### **COVER LETTER**

| TO: New Filing Section Division of Corporations  |  |
|--|--|
| SUBJECT: Fundacion   | n Josulara   |
|  | tion - must include suffix   |
| Dear Sir or Madam:   |  |
| The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good sabove referenced foreign corporation to transact but | Standing" and check are submitted to register the  |
| Please return all correspondence concerning this ma  | atter to the following:  |
| TAMMY PEREZ  |  |
|  | of Person  |
| TABADESA ASSOCIATES  |  |
|  | Company  |
| 7005 W 17TH CT   |  |
| HIALEAH, FL 33014  | ddress   |
| - City/Sta   | te and Zip code  |
| TAMMYP@TABADESA.COM  |  |
| E-mail address: (to be us  For further information concerning this matter, plea  | sed for future annual report notification) use call:   |
| TAMMY PEREZ at (786  | 5 541-8043   |
|  | rea Code & Daytime Telephone Number  |
|  |  |
| STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301                    | MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |
| Enclosed is a check for the following amount:  |  |
| ☐ \$70.00 Filing Fee   | ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certified Copy                                      |



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

November 22, 2013

TAMMY PEREZ TABADESA ASSOCIATES 7005 W 17TH CT HIALEAH, FL 33014

SUBJECT: FUNDACION JOSULARA

Ref. Number: W13000064784

RECEIVED

13 DEC -9 PM 3: 32

SEOWLESSEE FLORIDA

We have received your document for FUNDACION JOSULARA and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Ruby Dunlap Regulatory Specialist II

Letter Number: 713A00027044

www.sunbiz.org

DO DOV 0007 / 11.1 .... Th. 11. 900

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

| ( 1141114 41141411        | able in Florida, enter alternate corporate nan  | ne adopted for the purpose of transacting business in Florida                         | _ |
|---------------------------|---|---|---|
| Panama                    |   | 3   |   |
|                           | under the law of which it is incorporated)  | 3(FEI number, if applicable)  | _ |
| 03/18/20                  | 11  | 5. PERPETUAL  |   |
| (Date                     | of incorporation)   | (Duration: Year corp. will cease to exist or "perpetual")                             | _ |
| UPON Q                    | UALIFICATION  |   |   |
|                           |   | s in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability) |   |
| 7005 W 1                  | 7TH CT HIALEAH, FL 3  | 33014   |   |
|                           | (Principal office a   | •   | _ |
| 7005 W 1                  | 7TH CT, HIALEAH, FL 330   | 014   |   |
|                           | (Current mailing a  | ddress)   | _ |
|                           |   |   |   |
| REAL ES                   | STATE INVESTMENT AN   | ND RENTAL   |   |
|                           | STATE INVESTMENT AN   | ND RENTAL country to be carried out in state of Florida)                              | _ |
| (Purpose(s                | ) of corporation authorized in home state or  | country to be carried out in state of Florida)  | _ |
| (Purpose(s                | et address of Florida registered agent: (I  | country to be carried out in state of Florida)  | _ |
| (Purpose(s                | of corporation authorized in home state or et address of Florida registered agent: (I | P.O. Box NOT acceptable)  | _ |
| (Purpose(s                | et address of Florida registered agent: (I  | P.O. Box NOT acceptable)  |   |
| (Purpose(s Name and stree | of corporation authorized in home state or et address of Florida registered agent: (I | P.O. Box NOT acceptable)  |   |

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: \_\_ Vice Chairman: Address: \_\_\_\_ Address: \_\_\_\_ Director: JOSE OLIVA Address: 7005 W 17TH CT HIALEAH, FL 33014 **B. OFFICERS** Address: \_\_\_\_ Vice President: Address: \_\_\_\_\_ Secretary: Address: Treasurer: \_\_\_ Address: \_\_\_\_ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he of she is aware that 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. 14. JOSE M OLIVA VALERO, TREASURER

REPUBLICA DE PANAMA

REGISTRO PUBLICO DE PANAMA REGISTROPUBLICODEPANAMA REGIST

No. 457579

PAG. CONVEDRORAZS //

14/Nov/2013

CERTIFICA

- QUE LA FUNDACION :

CON VISTA A LA SOLICITUD 13 -

130644

FUNDACION JOSULARA

≸SE ENCUENTRA REGISTRADA LA FICHA

45696 DOC.

: SUSANA OLÍVA ZAMORA

: RAQUEL OLIVA ZAMORA

: JOSE MARIA OLIVA VALERO : LAURA OLIVA VALERO

DESDE EL VEINTITRES DE MARZO DE DOS MILLONCE.

EN LA SECCION DE FUNDACIONES DE INTERES PRIVADO.

QUE LA-FUNDACION SE ENCUENTRA VIGENTE

QUE SU(S) FUNDADOR(ES) ES(SON) :

1 ) JOSE OLIVA GARCIA .

QUE SUS MIEMBROS DEL CONSEJO SON:

SUSANA OLIVA ZAMORA RAQUEL OLIVA ZAMORA

JOSE MARIA OLIVA VALERO

LAURA OLIVA VALERO

QUE SU AGENTE RESIDENTE ES: SOBERON Y ASOCIADOS

QUE SU PATRIMONIO ES DE \*\*\*\*\*\*\*\*20,000.00 DOLARES AMERICANOS.

QUE SU DOMICILIO ES PANAMA

QUE LOS CARGOS DE LOS MIEMBROS SON:

PRESIDENTE .

VICE-PRÉSIDENTE

TESORERO

SECRETARIO

-DECIMO OCTAVO: REPRESENTACION LEGAL:

LA REPRESENTACION LEGAL DE LA FUNDACION LA EJERCERA EL FUNDADOR DE LA FUNDACION. UNA VEZ PRODUCIDO SU FALLECIMIENTO, LA REPRESENTACION LEGAL RECAERA EN LÁ PERSONA QUE DESIGNE EL CONSEJO DE LA FUNDACION DE ACUERDO

A LAS REGLAS ESTABLECIDAS EN EL REGLAMENTO. --

EXPEDIDO Y FIRMADO EN LA PROVINCÍA DE PANAMA , EL CATORCE DE NOVIEMBRE

DEL DOS MIL TRECEY A LAS 05:13:55,P.M.

ESTA CERTIFICACION PAGO DERECHOS POR UN VALOR DE B/. 30.00

COMPROBANTE NO. 13 -130644

NO. CERTIFICADO: FUND. INT. PRIV. - 005724

FECHA: Jueves 14, Noviembre DE 2013 // EDROPA25 //

**APOSTILLE** 

Convention de la haye du 5 óctobre 1961 /

1 Pais PANAMA

El presente documento público

2 na sido firmado por Carrado

3 quien actua en calidad

4 y esta revestido del sello/timbre de 30

**CERTIFICADO** 

15 NOV 2013

5 EN Panamá

7 por DIRECCION ADMINISTRATIVA

8 Bajo el número 66.826

9 Sello/timbre > 10 Firma 4

YADINEL ORTEGA CERTIFICADOR



 Esta Autorización ... implica responsabilida en cuanto al conteni

#### TRANSLATION OF CERTIFICATE OF STATUS

Prepared by: Julie Muniz under oath on December 5, 2013

Republic of Panama

Public Records of Panama

Certifies

As per request 13 - 130644

#### **Fundacion Josulara**

It is recorded under record 45696 Document 1943904 Since March 23, 2011 in the section of private interest foundations

That the foundation is in force That it founder is Jose Oliva Garcia That the members are:

Susana Oliva Zamora Raquel Oliva Zamora Jose Maria Oliva Valero Laura Oliva Valero

That its resident agent is: Soberon and Associates

That its worth is \$ 20,000.00 U.S. Dollars That its residence Country is Panama

The positions of the members are President: Susana Zamora Oliva

Vice- President:

Raquel Oliva Zamora Jose Maria Oliva Valero

Treasurer: Secretary:

Laura Oliva Valero

Eighteenth: Legal Representation:

The Legal Representation of the Foundation shall exercise the founder of the foundation. Upon his death, the legal representation falls through to the person designated by the board of the foundation according to the rules established in the regulations.

Issued and signed Province of Panama in the November 14, 2013 at 5:13 PM

Note: Payment of this certification is B / 30.00

Receipt # 13 130644

Certificate Number: Fund. Int. Priv. -005 724

Dated: Thursday November 14, 2013

#### Apostilles

The Convention de la haye du 5 October 1961

1: Panama Country

This public document

- 2: Has been signed Eduardo Robinson
- 3: Who acts as Certificate
- 4: And is stamped with the seal / stamp of 30

#### Certified

- 5: At Panama
- 6: November 15, 2013
- 7: Administrative Office
- 8: Under the number 66-826
- 9: Seal 2
- 10: Signature Corona E.Org