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(City/State/Zip/Phone #)	07/13/1501010011 **70.00			
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TO: Registration Section Division of Corporations

SUBJECT: CHARISMA VENTURES, INC.

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Name of corporation - must include suffix

Dear Sir or Madam:

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The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

ANGEL D. CORDOVA, JR.

	Name of Pers	ion Egg 5
ANGEL D. CORDOVA & CO.		
I	irm/Compan	
780 N.W. 42 AVE SUITE 325		SEPT P
	Address	100 N
MIAMI, FL 33126		設計し
	ty/State and 2	Cip code
AR@ACORDOVA.COM		
E-mail address: (to	be used for f	uture annual report notification)
For further information concerning this matter	, please call:	
	-	
ANGEL D. CORDOVA JR. at (305)	444-5511
•	Area Code	Daytime Telephone Number
STREET/COURIER ADDRESS:		MAILING ADDRESS:
Registration Section		Registration Section
Division of Corporations		Division of Corporations
Clifton Building 2661 Executive Center Circle		P.O. Box 6327 Tallahassee, FL 32314
Tallahassee, FL 32301		Tallallassee, FL 52514
Enclosed is a check for the following amount:		
5 \$70.00 Filing Fee 5 \$78.75 Filing Fee	<u>ይ</u> ጠ\$ግ	78 75 Filing Fee & 🗖 \$87 50 Filing Fee

00 Filing Fee Solution Status Certified Copy

\$87.50 Filing Fee, Certificate of Status & Certified Copy

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.

1. CHARISMA VENTURES, INC.

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(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")

(If name	unavai	lable in Florida, enter alterna	te corporate name	ado	pted for the purpose of transactin	g business in Florida)
2.	BRITIS	H VIR	GIN ISLANDS	3.	98	-1230282	
-	(State o	r coun	try under the law of which it	s incorporated)		(FEI number, if ap	plicable)
4. 5	остов	ER 6,	2000				
		(Dat	e of incorporation)			(Date of duration, if other	than perpetual)
6. :	JULY	6,	2015				
7 V	ANTER			607.1501 & 607.1	502,	orida, if prior to registration) F.S., to determine penalty liabili M TORTOLA BVI	ity)
/. <u>v</u>			TLAZA, ZTE, WICKIAM			office address)	
2	0820 NI	E 30 PI	AVENTURA, FL 33180				
				(Current maili	ng a	ddress, if different)	SEORE
8. 1	Name a	nd <u>stre</u>	et address of Florida regis	tered agent: (P.	O. E	Box NOT acceptable)	
	N	ame:	ANGEL D. CORDOVA				E D
Off	fice Add	iress:	780 N.W. 42 AVE. STE	325		_	STATE
			MIAMI			, Florida	
			(Cit	/)		(Zip code)	

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

10. 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.

11. Name# and business addresses of officers and/or directors:

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A. DIRECTORS	
Chairman:	
Address:	· · · · · · · · · · · · · · · · · · ·
Vice Chairman:	
Address:	
	/
Director: RAQUEL H. DE SACAL	
Address: BOSQUE DE DURAZNOS 65, STE 406-B	
MEXICO, D.F. 11700	
Director: RAMON SACAL	
Address: 20820 N.E. 30 PL	
AVENTURA, FL 33180	
B. OFFICERS	
President: <u>RAQUEL H. DE SACAL</u>	
Address: BOSQUE DE DURAZNOS 65, STE 406-B	
MEXICO, D.F. 11700	125 125 125
Vice President:	çm 5
Address:	
	•
Secretary: RAQUEL H. DE SACAL	
Address: BOSQUE DE DURAZNOS 65, STE 406-B, MEXICO D.F. 11700	
Treasurer: RAMON SACAL	
Address: 20820 N.E. 30 PL., AVENTURA, FL 33180	
NOTE: If necessary, you may attach an addendum to the application listing additional	officers and/or directors.
12. X fourth	
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) at are true and that he or she is aware that false information submitted in a document to th a third degree felony as provided for in s.817.155, F.S.	
13. RAMON SACAL, DIRECTOR/SEC.	

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(Typed or printed name and capacity of person signing application)

