# F 150003243

(Requestor	s Name)
(Address)	
(Address)	
(City/State/	Zip/Phone #)
PICK-UP	
(Business E	ntity Name)
(Document	Number)
Certified Copies C	ertificates of Status
Special Instructions to Filing Of	ficer:

Office Use Only

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7/24/15

#### **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: MUPI CORP
Name of corporation - must include suffix
Dear Sir or Madam:
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: PEDRO GONZALEZ
Name of Person
MUPI CORP
13858 SW 56TH ST.
MIAMI 33175
City/State and Zip code
pedro.gonzalez@union-andina.net  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
PEDRO GONZALEZ at (347 ) 6841217
Name of Person  Area Code & Daytime Telephone Number  STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  Area Code & Daytime Telephone Number  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 & □ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

May 28, 2015

PEDRO GONZALEZ 13858 SW 56TH STREET MIAMI, FL 33175

SUBJECT: MUPI CORP

Ref. Number: W15000028999

We have received your document for MUPI CORP and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The registered agent must sign accepting the designation.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 015A00011254

15 JUL-22 PH 3.5



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

May 8, 2015

MUPI CORP 2ND MAILING 8102 ROOSEVELT AVENUE JACKSON HEIGHTS, NY 11372

SUBJECT: MUPI CORP Ref. Number: W15000028999

We have received your document for MUPI CORP and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

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.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 915A00009683

15 JUL 22 PH 3.5



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

April 24, 2015

PEDRO GONZALEZ 13858 SW 56TH STREET MIAMI, FL 33175

SUBJECT: MUPI CORP

Ref. Number: W15000028999

We have received your document for MUPI CORP and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

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.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 215A00008402

15 JUL 22 PM 3:5

### 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.

no., 00., 00	orp," "Inc," "Co," or "Corp.")	
	<del>-</del>	orate name adopted for the purpose of transacting business in Florida)
NEW YC	under the law of which it is incorp	3. 113361165 (FEI number, if applicable)
12/19/19	-	PERPETUAL  5.
	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
(Bute)	n meorporation,	(Balanon: Your colp. will collect to ships of perpendict)
	(Date first transacted	d business in Florida, if prior to registration)
	(SEE SECTIONS 607.150	01 & 607.1502, F.S., to determine penalty liability)
8102 RO	OSEVELT AVE. J	JACKSON HEIGHTS NY 11372
	` '	l office address)
13858 SV	N 56TH STREET	
	(Current m	mailing address)
NI	44 6 F1	(D.O. Paul NOT apportable)
Name and street	address of Florida registered a	agent: (P.O. Box NOT acceptable)
Name:	GERMAN G	
fice Address:	8600 SW14	19 <sup>th</sup> ≯UE II I
nee Maness.		
	MIA MI	, Florida 33/93 (Zip code)
	(0.13)	(Sip volv)
	nt's acceptance:	ccept service of process for the above stated corporation at the
		re appointment as registered agent and agree to act in this capa
		ll statutes relative to the proper and complete performance of n
signated in this of ther agree to co		ti- usi-u Carri aisi-u aa waalasaaa daa aast
signated in this of ther agree to co		ligations of my position as registered agent.
signated in this ( rther agree to co		ligations of my position as registered agent.
signated in this or ther agree to co		ligations of my position as registered agent.

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. Names and business addresses of officers and/or directors: FILED A. DIRECTORS 15 JUL 22 PH 3 57 Chairman: Vice Chairman: **B. OFFICERS** President: ANDY ALTENA Address: AVE ESPAÑA #23, ALCOBENDAS, MADRID SPAIN Address: Secretary: PEDRO GONZALEZ Address: 8102 ROOSEVELT AVE, JACKSON HEIGHTS NY, 11372 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 or 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. 13. PEDRO GONZALEZ CEO

## State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of MUPI CORP. was filed on 12/19/1996, under the name of MUTUALISTA PICHINCHA NORTH AMERICAN CORPORATION, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

A Certificate of Amendment MUTUALISTA PICHINCHA NORTH AMERICAN CORPORATION, changing its name to MUTUALISTA PICHINCHA CORP., was filed 05/07/1997.

A Certificate of Amendment MUTUALISTA PICHINCHA CORP., changing its name to MUPI CORP., was filed 03/13/2006.

The Biennial Statement is past





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WITNESS my hand and the official seal of the Department of State at the City of Albany, this 25th day of June two thousand and fifteen.

Churthy Scientina

Executive Deputy Secretary of State

0150/0/0400 1