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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617~6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)205-8842 Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION

UHY Del Valle & Nieves PSC Certified Public Accountants and Business

Certificate of Status	1
Certified Copy	1
Page Count	05
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COVER LETTER

TO: Registration Section Division of Corporations		
•	ED PUBLIC ACCOUNTANTS AND BUSINESS	
Name of corporation - must include suffix		
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for As "Certificate of Existence," or "Certificate of Good Standi above referenced foreign corporation to transact business	ng" and check are submitted to register the	
Please return all correspondence concerning this matter to CARLOS F NIEVES VEGA	the following:	
Name of Pe	rson	
UHY DEL VALLE & NIEVES PSC		
P O BOX 361863	ny	
Address		
SAN JUAN PR 00936-1863		
City/State and	Zip code	
c.nleves@uhy-pr.com		
E-mail address: (to be used for	future annual report notification)	
For further information concerning this matter, please call	l:	
CARLOS F NIEVES VEGA 787	793-4650	
Name of Person Area Code	Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314	
Enclosed is a check for the following amount:		
☐ \$70.00 Filing Fee	178.75 Filing Fee & \$\$87.50 Filing Fee, Certified Copy 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.

UHY DEL VALLE & NIEVES PSC CERTIFIED PUBLIC ACCOUNTANTS AND BUSINESS ADVISORS, CORP (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp,") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) **PUERTO RICO** 66-0575454 (State or country under the law of which it is incorporated) (FEI number, if applicable) 09/27/1999 (Date of incorporation) (Datelof duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SER SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1202 SACRAMENTO ST DELTONA FL 32725 (Principal office address) P O BOX 361863 SAN JUAN PR 00936-1863 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) CT CORPORATION SYSTEM Name: 1200 S. PINE ISLAND ROAD Office Address: PLANTATION Florida (City) 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, Angel Nunez Assistant Secretary (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. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chairman:	
Address:	
VII Chalanna	•
Vice Chairman:	
Address:	
Director:	
Address:	
Disease	
Director:	
Address:	
B. OFFICERS	100 t
President: RAFAEL DEL VALLE VEGA	三百万 5
P O BOX 361863 Address:	
SAN JUAN PR 00936-1863	SS 10
CARLOS F NIEVES VEGA Vice President:	
HACIENDA SAN JOSE LAS NUBES IIII VIA NARANJALES	[5. :
CAQUAS PR 00727-3150	75 S
CARLOS F NIEVES VEGA	
HACIENDA SAN JOSE LAS NUBES 1111 VIA NARANJALES	
CARLOS F NIEVES VEGA	***************************************
Trossurer: HACIENDA SAN JOSE LAS NUBES 1111 VIA NARANJALES Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officer	s and/or directors
12	s and of directors.
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms the are true and that he or she is aware that false information submitted in a document to the Depart third degree felony as provided for in s.817.155, F.S. CARLOS F NIEVES-VEGA, VICE PRESIDENT	nat the facts stated herein riment of State constitutes
(Typed or printed name and capacity of person signing application)	



Commonwealth of Puerto Rico
DEPARTMENT OF STATE
San Juan, Puerto Rico

CERTIFICATE OF EXISTENCE

I, DAVID E, BERNIER RIVERA, Secretary of State of the Commonwealth of Puerto Rico.

CERTIFY: That, UHY DEL VALLE & NIEVES PSC CERTIFIED PUBLIC ACCOUNTANTS AND BUSINESS ADVISORS, registry number 1069, is a domestic for profit professional corporation, organized on September 27, 1999, in accordance to the General Corporations Law, as amended.

This certification does not certify that this corporation has filed its annual reports, pursuant to the requirements of the General Corporations Law, as amended, if you need to know if such reports have been filed, you must request a Certificate of Good Standing.

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IN WITNESS WHEREOF, the undersigned by virtue of the authority vested by law, hereby lesues this certificate and affixes the Great Seal of the Commonwealth of Puerto Rico, in the City of Sen Juan, Puerto Rico, today, August 5, 2015.

DAVIDE. BERNIER RIVERA Secretary of State

To validate this certificate go to:

http://astado.pr.gov/

This certificate can be validated an unlimited number of times before its expiration date of 04-Aug-2016.

Certificate Validation Number: 126357-85484168

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