F16000001671

(Re	equestor's Name)		
(Address)			
(Address)			
(Ci	ty/State/Zip/Phone	ə #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)-			
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C LEWIS

COVER LETTER *

TO: Amendment Section Division of Corporations	· · · · · · · · · · · · · · · · · · ·	
SUBJECT: RO	ovner International Inc	
	Name of Corporation	
DOCUMENT NUMBER:	F16000001671	
The enclosed Affidavit by Foreign submitted for filing.	Corporation to Change/Add Officer(s) and/or Director(s) and fee are	
Please return all correspondence co	oncerning this matter to the following:	
Athys Pert		
Name of Contact F	Person	
Rovner Interna	tional Inc	
Firm/Compa	ny	
306 Alcazar Ave,	Suite 203	
Address		
Coral Gables,	FL 33134	
City/State and Zi	p Code	
athysp@gma	iil.com	
E-mail address: (to be used for fi		
For further information concerning	this matter, please call:	
Athys Pertuz	at (305 890-3271	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check made payable	to the Florida Department of State for the following amount:	
	Filing Fee & S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	



SECRETARY OF STATE DIVISION OF CORPORATIONS

16 APR 18 PM 3: 12

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S) AND/OR DIRECTOR(S)

(Note: Applicable only during the first calendar year of qualification)

(Itote: Applicable only during the I	ist carcinal year of qualification)	
The name of the foreign corporation as it appears Rovner Internation		
2. This entity was authorized to transact business in I number isF16000001671	Florida on 04/11/2016 and its Florida documen	
3. This corporation was formed under the laws of	Panama	
4. The name and address of each officer and/or direct	tor is as follows:	
<u>Title:</u> P	Name and Address Albino G Rodriguez Dominguez	
	Ave Samuel Lewis, Calle 54 Edif Afra	
	WTC, Ciudad Panama, Panama	
VP	Marco J Mancini	
	Ave Samuel Lewis, Calle 54 Edif Afra	
	WTC, Ciudad Panama, Panama	
<u>T</u>	Oscar Zelaya	
	Ave Samuel Lewis, Calle 54 Edif Afra	
	WTC, Ciudad Panama, Panama	
(Attach additional pag	ges if necessary)	
Hodre)	President ·	
nature of an officer or director	Title of person signing	
Hbind 6 Kodriguez	FILING FEE \$35	

Make checks payable to Florida Department of State and Mail to: Division of Corporations PO Box 6327 Tallahassee, FL 32314