

F18000000313

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

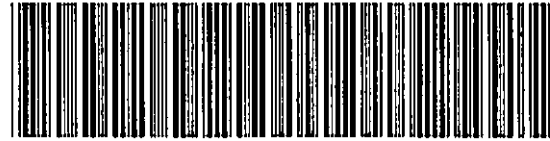
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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JAN 22 2018

COVER LETTER

TO: Registration Section
Division of Corporations
CENTER WIND CORP

SUBJECT: _____
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:
JOHN EGUSQUIZA, ESQ.

Name of Person
EGUSQUIZA LAW PA

Firm/Company
9960 SW 40TH STREET

Address
MIAMI, FLORIDA 33165

City/State and Zip code
JOHN@JEELAWPA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOHN EGUSQUIZA 305 223-8744

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
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☒ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & 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.*

CENTER WIND CORP.

1. _____
(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)
BRITISH VIRGIN ISLANDS

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
MAY 15, 2013

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
UPON REGISTRATION

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
753 SHOTGUN ROAD, SUNRISE, FLORIDA 33326

7. _____
(Principal office address)
753 SHOTGUN ROAD, SUNRISE, FLORIDA 33326

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

SEBASTIAN PONCELIZ

Name: _____

753 SHOTGUN ROAD

Office Address: _____

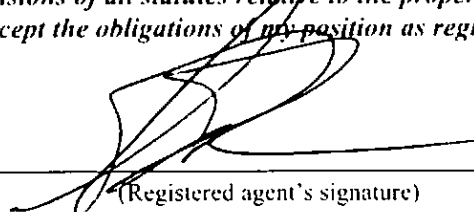
SUNRISE

33326

_____, Florida _____
(City) (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.

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11. Names and business addresses of officers and/or directors:

A. DIRECTORS

CLAUDIO JORGE RODRIGUEZ

Chairman: _____

MAIPU 712 PISO 4 "D"

Address: _____

BUENOS AIRES, 1006, ARGENTINA

ROXANA ALEJANDRA FARINA

Vice Chairman: _____

MAIPU 712 PISO 4 "D"

Address: _____

BUENOS AIRES, 1006 ARGENTINA

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: _____

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.

12. _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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. _____

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

Claudio Rodriguez

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**TERRITORY OF THE BRITISH VIRGIN ISLANDS
BVI BUSINESS COMPANIES ACT, 2004**



E33C42B505

**CERTIFICATE OF GOOD STANDING
(SECTION 235)**

The REGISTRAR OF CORPORATE AFFAIRS, of the British Virgin Islands HEREBY CERTIFIES that, pursuant to the BVI Business Companies Act, 2004 at the date of this certificate, the company,

CENTER WIND CORP.

BVI COMPANY NUMBER: 1774059

1. Is on the Register of Companies;
2. Has paid all fees and penalties due under the Act;
3. Has not filed articles of merger or consolidation that have not become effective;
4. Has not filed articles of arrangement that have not yet become effective;
5. Is not in voluntary liquidation;
6. Is not in liquidation under the Insolvency Act, 2003;
7. Is not in receivership under the Insolvency Act, 2003;
8. Is not in administrative receivership; and
9. Proceedings to strike the name of the company off the Register of Companies have not been instituted.



REGISTRAR OF CORPORATE AFFAIRS

27th day of December, 2017