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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

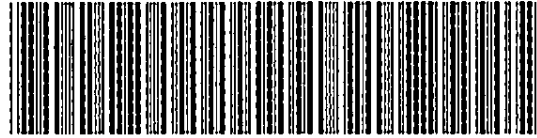
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: INTI GROUP, INC.
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:

CLAUDIA HIDALGO
Name of Person

INTI GROUP, INC
Firm/Company

14651 BISCAYNE BLVD #134
Address

MIAMI, FL 33181
City/State and Zip code

claudiahdgo@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CLAUDIA HIDALGO at (305) 209 2710
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.

1. INTI GROUP INC.
(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)

2. WYOMING 3. 47-309 1223
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 2-2-15 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 1718 CAPITOL AVE. CHEYENNE, WY 82001
(Principal office address)

14651 BISCAYNE BLVD #134 MIAMI, FL 33181
(Current mailing address, if different)

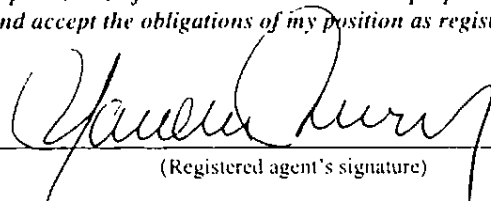
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CLAUDIA HIDALGO

Office Address: 14651 BISCAYNE BLVD #134
MIAMI, Florida 33181
(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.

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

A. DIRECTORS

Chairman: CLAUDIA HIDALGO

Address: 14651 BISCAYNE BLVD #134
MIAMI, FL 33181

Vice Chairman: CLAUDIA HIDALGO

Address: 14651 BISCAYNE BLVD #134
MIAMI, FL 33181

Director: CLAUDIA HIDALGO

Address: 14651 BISCAYNE BLVD #134
MIAMI, FL 33181

Director: _____

Address: _____

B. OFFICERS

President: CLAUDIA HIDALGO

Address: 14651 BISCAYNE BLVD #134
MIAMI, FL 33181

Vice President: CLAUDIA HIDALGO

Address: 14651 BISCAYNE BLVD #134
MIAMI, FL 33181

Secretary: CLAUDIA HIDALGO

Address: 14651 BISCAYNE BLVD #134 MIAMI, FL 33181

Treasurer: CLAUDIA HIDALGO

Address: 14651 BISCAYNE BLVD #134 MIAMI, FL 33181

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. CLAUDIA HIDALGO

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

STATE OF WYOMING
Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that

INTI Group, Inc.

a profit corporation originally incorporated under the laws of **Nevada** on **February 02, 2015** did on **March 03, 2016**, apply for a Certificate of Incorporation and filed Articles of Continuance in the office of the Secretary of State of Wyoming.

I FURTHER CERTIFY that this profit corporation has renounced its state or country of incorporation, and is now incorporated under the laws of the state of Wyoming is in good standing as of the date of this certificate.

I have affixed hereto the Great Seal of the State of Wyoming and duly executed this official certificate at Cheyenne, Wyoming on **December 13, 2018**.



Filed Date: 03/03/2016

Edward A. Buchanan
Secretary of State

By: Angie Gonzales