FPANNUS 188

(Re	questor's Name)		
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Certified Copies	_ Centificate	s of Status	
Special Instructions to Filing Officer			





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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

uevas Trawlers, Inc					
				Art of Inc. File	
	-			LTD Partnership File	
				Foreign Corp. File	
			<u> </u>	L.C. File	
				Fictitious Name File	
				Trade/Service Mark	
				Merger File	20160
				Art, of Amend, File	
				RA Resignation	72
			<u> </u>	Dissolution / Withdrawal	
				Annual Report / Reinstatement	
			<u>X</u>	Cert. Copy	: r6
				Photo Copy	•
				Certificate of Good Standing	
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				Corp Record Search	
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Cuevas Traw C	ens INC.
Name of corporati	on - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Stabove referenced foreign corporation to transact businesses."	tanding" and check are submitted to register the
Please return all correspondence concerning this mat	ter to the following:
EDWARD CIEV	As dr.
Cuevas Tra	01.505
CLEVAS TRAC	ompany
P.O. Box 129 / 125 5. Add	OUTH Shore Drive
Add	Iress
PORT SABEL TEXAS T	⁷ 8578
CityState	and Zip code
ej cuevas@	and Zip code Live. Com I for future annual report notification)
E-fnail address: (to be used	for future annual report notification)
For further information concerning this matter, please	call:
Name of Person Area Co	de 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 & ☐ \$87.50 Filing Fee. Certified Copy 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.

(Enter name "Inc" "Co.,"	of corporation: must include "INCORPORATED." "COMPANY." "CORPORATION." "Corp." "Inc." "Co." or "Corp.")	
	vailable in Florida, enter alternate corporate name adopted for the purpose of transacting busine	
2. TEX	AS / USA 3	
(State or co	untry under the law of which it is incorporated) (FEI number, if applicable)	
1)	- 29 - 2000 5. Date of incorporation) (Date of duration, if other than per	petual)
6		
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
7. 125	SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) South Shore Drive Port SABEL TX 785 (Principal office address) BOX 729 PORT SABEL TX 78578 (Current mailing address, if different)	78
	(Principal office address)	<u> </u>
P. O.	BOX 729 PORT /SABEL TX 78578	
	(Current mailing address, if different)	
8. Name and s	treet address of Florida registered agent: (P.O. Box NOT acceptable)	
Name:		
OCC. A 11	417 E VIRGINIA ST SUITE I	:
Office Address	TALLAHASSEE, FL 32301	<u>်</u>
		တ်
Having been n designated in t further agree to	agent's acceptance: amed as registered agent and to accept service of process for the above stated corpor his application, I hereby accept the appointment as registered agent and agree to acc o comply with the provisions of all statutes relative to the proper and complete perfo m familiar with and accept the obligations of my position as registered agent.	t in this canacity
	/S/ Seth Neeley as authorized representative of Your Capital Connection, Inc.	
	(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:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: JOSE GUADAMPE CUEVAS	
Address: 28 E. CAROWN OR. SOUTH PAO	
P.O. BOX 729 PORT BABER 7.	
Vice President:	~~
Address:	
	N
Secretary:	
Address:	Ö
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the app	
12. Jun & Cun	many, mount additional officers and/of directors.
Signature of Direct The officer or director signing this document (and who is listed are true and that he or she is aware that false information submather than the state of t	d in number 11 above) affirms that the facts stated begain
	ASE G. CHEVAS President
(Typed or printed name and capacity of	of person signing application)



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles Of Incorporation for CUEVAS TRAWLERS, INC. (file number 158828600), a Domestic For-Profit Corporation, was filed in this office on June 29, 2000.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on December Et., 2019.



Ruth R. Hughs Secretary of State

Fax: (512) 463-5709 TID: 10264 Diał: 7-1-1 for Relay Services Document: 931503190020