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## **COVER LETTER**

	egistration Section ivision of Corporations			
SUBJEC	FRONTAL GPM INC			
DODAL.C		f corporation	- must include suffix	
Dear Sir o	or Madam;			
"Certifica	sed "Application by Foreign Corte of Existence," or "Certificate erenced foreign corporation to tra	of Good Stand	ling" and check are submi	
Please ret	urn all correspondence concernir	ng this matter	to the following:	
JAVIERA	HERRERA			
		Name of F	erson	<del></del>
FRONTA	L GPM INC			
	<del></del>	Firm/Comp	pany	
848 BRIC	KELL AVE STE 1210			
		Addre	SS	
міамі, ғ	1. 33131			
	······································	City/State an	d Zip code	
JHERREI	RA@FRONTALTRUST.COM			
	E-mail address:	(to be used to	or future annual report not	ification)
For furthe	er information concerning this ma	atter, please ca	ill:	
LUIS F. S.	AN MARTIN	617 at (	7103837	
	Name of Person	Area Code	Daytime Telepho	ne Number
R D T 24	TREET/COURIER ADDRESS egistration Section ivision of Corporations he Centre of Tallahassee 415 N. Monroe Street, Suite 810 allahassee, FL 32303	<b>;</b> :	MAILING ADI Registration Sec Division of Corp P.O. Box 6327 Tallahassee, FL	tion porations
Please mak	is a check for the following amo te check payable to: FLORIDA DE Filing Fee S78.75 Filing Certificate of	PARTMENT     Fee &		\$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.

FRONTAL GPN	A INC			
	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp,")	"COMPANY," "CORPORATIO	N."	
(If name unavails	able in Florida, enter alternate corporate name a	dopted for the purpose of transacti	ng business in Florida)	
DE	3. 82-2978328  atry under the law of which it is incorporated) (FEI number, if applicable)			
(State or countr	y under the law of which it is incorporated)	(FEI number, if a	pplicable)	
SEPTEMBER 2	6TH, 2017 5. of incorporation)			
(Date	of incorporation)	(Date of duration, if other	than perpetual)	
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150		lity)	
848 BRICKELL.	AVE STE 1210, MIAMI FL 33131			
<del></del>		e <u>street</u> address)	_	
	(Current mailing	address, if different)	<del></del>	
Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)		
Name:	LUIS FELIPE SAN MARTIN		~ 8	
ffice Address:	848 BRICKELL AVE STE 1210		er en er en	
Trice Address.	MIAMI	Florida	FILED 21 JUL 13 PM 21 JUL 13 PM	
	(City)	(Zip code)	- 113 G Π	
Designation of ass			⊋ D	
	ent's acceptance: ed as registered agent and to accept servic	e of process for the above state		
esignated in this	application, I hereby accept the appointm	ent as registered agent and ag	ree to act in this capacit	
	omply with the provisions of all statutes re	lative to the proper and comple	ete performance of my a	
			•	
	with and accept the obligations of my pos		•	
		itim as registered agent.		

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

A. DIRECTORS			
□Chairman	Name: ANDRES ECHEVERRIA SALAS	□Chairman	Name: EMILIO FUENZALIDA SALAME
□Vice Chairman	848 BRICKELL AVE STE 1210 Address:	□Vice Chairman	Address: 848 BRICKELL AVE STE 1210
□Director	MIAMI, FL 33131	<b>■</b> Director	MIAMI, FL 33131
■ President		□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	☐ Secretary	□Treasurer
Other	Other	□Other	□Other
□ Chairman	Name: CARMEN VICUNA VERGARA	□ Chairman	Name: LUIS FELIPE SAN MARTIN
□Vice Chairman	Address: 848 BRICKELL AVE STE 1210	□Vice Chairman	Address: 848 BRICKELL AVE STE 1210
Director	MIAMI, FL 33131	Director	MIAMI, FL 33131
□President		□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	☐ Secretary	□Treasurer
□Other	□Other	□Other	
□Chairman	Name:	□Chairman	Name:
	Address:		Address:
Director		□ Director	
President		□President	
□Vice President		□ Vice President	
Secretary	□Treasurer	☐ Secretary	□Treasurer
□Other		□Other	
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	ctor signing this document (and who is listed in num alse information submitted in a document to the Dep		

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "FRONTAL GPM INC." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-FIFTH DAY OF JUNE, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FRONTAL GPM INC." WAS INCORPORATED ON THE TWENTY-SIXTH DAY OF SEPTEMBER, A.D. 2017.

Authentication: 203532411

Date: 06-25-21