

F22000000528

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

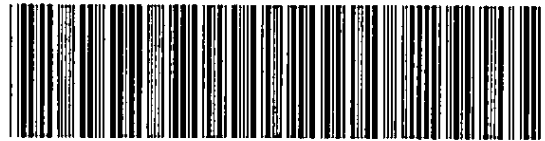
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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JAN 18 2022

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22 JAN 18 PM 6:45  
JAN 18 2022

T. LEMIEUX  
JAN 26 2022

January 10, 2022

To: Registration Section – Division of Corporations

Please find attached the following documents in order to register Agro Management Services Corp:

- Cover Letter
- Application by Foreign Corporation for Authorization to Transact Business in Florida
- Original Legal Entity Certification from the country of Panama
- Translation of the Legal Entity Certification
- \$70 Cashier's Check #6629705077

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** AGRO MANAGEMENT SERVICES CORP

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:

VIVIANA CALLAHAN

Name of Person

AGRO MANAGEMENT SERVICES CORP

Firm/Company

220 ALAHAMBRA CIR STE 1100

Address

CORAL GABLES, FLORIDA 33134

City/State and Zip code

VIVIANA@LAADSA.COM

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

For further information concerning this matter, please call:

VIVIANA CALLAHAN

at (786) 378-9049

Name of Person

Area Code

Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- ☒ \$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. AGRO MANAGEMENT SERVICES CORP

(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. PANAMA 3. 98-1634611  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 07/06/2021 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. 220 ALHAMBRA CIR STE 1100, CORAL GABLES, FLORIDA 33134  
(Principal office street address)

\_\_\_\_\_  
(Current mailing address, if different)

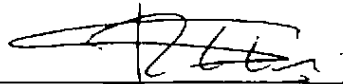
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: RAFAEL CESTTI

Office Address: 220 ALHAMBRA CIR STE 1100  
CORAL GABLES, Florida 33134  
(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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

**A. DIRECTORS**

☐ Chairman Name: GUSTAVO MARTINEZ  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director 220 ALHAMBRA CIR STE 1100  
☒ President CORAL GABLES, FLORIDA 33134  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

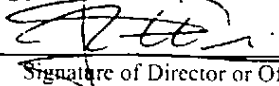
☐ Chairman Name: RAFAEL CESTTI  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director 220 ALHAMBRA CIR STE 1100  
☐ President CORAL GABLES, FLORIDA 33134  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☒ Treasurer  
☒ Other CFO ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: ISABEL PEREZ  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director 220 ALHAMBRA CIR STE 1100  
☐ President CORAL GABLES, FLORIDA 33134  
☒ Vice President \_\_\_\_\_  
☒ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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. Rafael Cestti, Treasurer  
(Typed or printed name and capacity of person signing application)

TRANSLATION

**Panama Public Registry Office**

SIGNED BY: GLADYS EVELIA JONES CASTILLO  
DATE: JANUARY 3, 2022 11:30:01 - 05:00  
PURPOSE: REQUEST FOR PUBLICATION  
LOCATION: PANAMA, PANAMA

LEGAL ENTITY CERTIFICATION

PURSUANT TO PETITION  
438/2022 (0) DATED JANUARY 3, 2022

THE COMPANY

**AGRO MANAGEMENT SERVICES CORP.**

TYPE OF ENTITY: CORPORATION

IS RECORDED AT FOLIO N° 155709181 OF THE (MERCANTILE DIVISION) AS OF FRIDAY,  
JULY 9, 2021.

THAT THE COMPANY IS IN GOOD STANDING.

THAT ITS OFFICERS ARE:

DIRECTOR/PRESIDENT: GUSTAVO MARTINEZ

DIRECTOR/TREASURER: RAFAEL CESTTI

DIRECTOR/VICE PRESIDENT: ISABEL PEREZ

SECRETARY: ISABEL PEREZ

OTHER OFFICERS: RAFAEL CESTTI (CHIEF FINANCIAL OFFICER)

ENTRIES STILL IN PROGRESS

NO PENDING ENTRIES.

DONE IN THE PROVINCE OF PANAMA ON MONDAY, JANUARY 3, 2022 AT 11:29 A.M.

NOTE: FEES PAID FOR THIS CERTIFICATION AMOUNT TO B/30.00 UNDER RECEIPT  
NUMBER 1403308905.

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THIS IS A TRUE TRANSLATION OF THE ORIGINAL DOCUMENT IN SPANISH. PANAMA,  
JANUARY 3, 2022. (SGD.) IRMA S. DE DAVIS, CERTIFIED PUBLIC TRANSLATOR, ID NO. 8-  
137-549 - (SEAL).





## Registro Público de Panamá

FIRMADO POR: GLADYS EVELIA  
JONES CASTILLO  
FECHA: 2022.01.03 11:30:01 -05:00  
MOTIVO: SOLICITUD DE PUBLICIDAD  
LOCALIZACION: PANAMA, PANAMA

*Gladys E Jones*

### CERTIFICADO DE PERSONA JURÍDICA

CON VISTA A LA SOLICITUD

438/2022 (0) DE FECHA 03/01/2022

QUE LA SOCIEDAD

AGRO MANAGEMENT SERVICES CORP.

TIPO DE SOCIEDAD: SOCIEDAD ANONIMA

SE ENCUENTRA REGISTRADA EN (MERCANTIL) FOLIO Nº 155709181 DESDE EL VIERNES, 9 DE JULIO DE 2021

- QUE LA SOCIEDAD SE ENCUENTRA VIGENTE

- QUE SUS CARGOS SON:

DIRECTOR / PRESIDENTE: GUSTAVO MARTÍNEZ

DIRECTOR / TESORERO: RAFAEL CESTTI

DIRECTOR / VICEPRESIDENTE: ISABEL PÉREZ

SECRETARIO: ISABEL PÉREZ

OTROS CARGOS: RAFAEL CESTTI (DIRECTOR DE FINANZAS)

### ENTRADAS PRESENTADAS QUE SE ENCUENTRAN EN PROCESO

NO HAY ENTRADAS PENDIENTES .

EXPEDIDO EN LA PROVINCIA DE PANAMÁ EL LUNES, 3 DE ENERO DE 2022 A LAS 11:29  
A. M..

NOTA: ESTA CERTIFICACIÓN PAGÓ DERECHOS POR UN VALOR DE 30.00 BALBOAS CON EL NÚMERO DE  
LIQUIDACIÓN 1403308905