

F22000003780

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

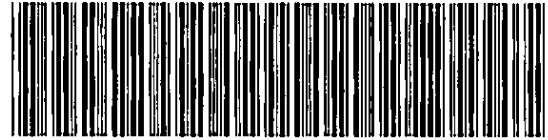
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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2022 JUN 17 PM 5:05

FILED

T. LEMIEUX
JUN 17 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ambers Associate CO, SA 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:

Peter Cagle

Name of Person

PBC Accounting & Tax Services Corp

Firm/Company

9700 S Dixie Hwy Suite 930

Address

Miami, FL 33156

City/State and Zip code

peter@pbctaxes.com

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

For further information concerning this matter, please call:

Peter Cagle

at (786) 536-7659

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 15, 2022

PETER CAGLE
9700 S DIXIE HWY STE 930
MIAMI, FL 33156

SUBJECT: AMBERS ASSOCIATE CO, SA CORP
Ref. Number: W22000050602

We have received your document for AMBERS ASSOCIATE CO, SA CORP and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 322A00008858

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. Ambers Associate CO. SA 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. 98-1583807
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 02/01/2005 5.
(Date of incorporation) (Date of duration, if other than perpetual)

6. 05/04/2021
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 13611 S Dixie Hwy Suite 109-412 Miami, FL 33176
(Principal office street address)

(Current mailing address, if different)

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

Name: Adriana Alvarez

Office Address: 13611 S Dixie Hwy Suite 109-412

Miami Florida 33176
(City) (Zip code)

FILED
2022 JUN 17 PM 5:05
TALLAHASSEE

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.

Adriana Alvarez
(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: Adriana Alvarez
 Vice Chairman Address: 13611 S Dixie Hwy Suite 109-412
 Director Miami, FL 33176
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

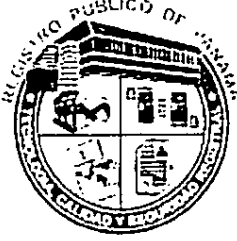
Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

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. Adriana Alvarez
 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. Adriana Alvarez - Director
 (Typed or printed name and capacity of person signing application)



Registro Público de Panamá

FIRMADO POR: UMBERTO ELIAS
PEDRESCHI PIMENTEL
FECHA: 2022.05.20 12:30:13 -05:00
MOTIVO: SOLICITUD DE PUBLICIDAD
LOCALIZACION: PANAMA, PANAMA

CERTIFICADO DE PERSONA JURÍDICA

CON VISTA A LA SOLICITUD

199837/2022 (0) DE FECHA 20/05/2022

QUE LA SOCIEDAD

AMBERS ASSOCIATES CO. S.A.
TIPO DE SOCIEDAD: SOCIEDAD ANONIMA
SE ENCUENTRA REGISTRADA EN (MERCANTIL) FOLIO Nº 476944 (S) DESDE EL LUNES, 21 DE FEBRERO DE 2005
- QUE LA SOCIEDAD SE ENCUENTRA VIGENTE

- QUE SUS CARGOS SON:

SUSCRIPTOR: DULCAN INC.
SUSCRIPTOR: WINSLEY INC.

DIRECTOR: PEDRO ALVAREZ OLIVARES
DIRECTOR: NORAH CAPRILES DE ALVAREZ
DIRECTOR: FERNANDO ALBERTO ALVAREZ CAPRILES
DIRECTOR: ADRIANA LUCIA ALVAREZ CAPRILES
DIRECTOR: PEDRO MANUEL ALVAREZ CAPRILES
PRESIDENTE: PEDRO ALVAREZ OLIVARES
VICEPRESIDENTE: NORAH CAPRILES DE ALVAREZ
TESORERO: PEDRO MANUEL ALVAREZ CAPRILES
SECRETARIO: FERNANDO ALBERTO ALVAREZ CAPRILES
SUBSECRETARIO: ADRIANA LUCIA ALVAREZ CAPRILES

AGENTE RESIDENTE: MORENO & ARJONA - BUREAU

- QUE LA REPRESENTACIÓN LEGAL LA EJERCERÁ:
EL PRESIDENTE PUDIENDO TAMBIEN EJERCER ESE CARGO EL TESORERO O EL SECRE-TARIO EN LAS AUSENCIAS
DEL PRESIDENTE O CUALQUIER PERSONA QUE LA JUNTA DIRECTIVA DESIGNE CON ESE OBJETO.

- QUE SU CAPITAL ES DE 10,000.00 DÓLARES AMERICANOS
EL CAPITAL SOCIAL ES DE 10,000.00 DOLARES AMERICANOS DIVIDIDO EN 100 ACCIONES QUE PODRAN SER
NOMINATIVAS O AL PORTADOR DE UN VALOR NOMINAL DE 100.00 DOLARES CADA UNA.

- QUE SU DURACIÓN ES PERPETUA
- QUE SU DOMICILIO ES PANAMÁ , PROVINCIA PANAMÁ

ENTRADAS PRESENTADAS QUE SE ENCUENTRAN EN PROCESO

NO HAY ENTRADAS PENDIENTES .

REGIMEN DE CUSTODIA: CONFORME A LA INFORMACIÓN QUE CONSTA INSCRITA EN ESTE REGISTRO. LA
SOCIEDAD OBJETO DEL CERTIFICADO NO SE HA ACOGIDO AL RÉGIMEN DE CUSTODIA.
EXPEDIDO EN LA PROVINCIA DE PANAMÁ EL VIERNES, 20 DE MAYO DE 2022A LAS 11:22
A. M.. NOTA: ESTA CERTIFICACIÓN PAGÓ DERECHOS POR UN VALOR DE 30.00 BALBOAS CON EL NÚMERO
DE LIQUIDACIÓN 1403509772



Valide su documento electrónico a través del CÓDIGO QR impreso en el pie de página
o a través del Identificador Electrónico: DCA380AE-C375-4172-AE59-492867590C4D
Registro Público de Panamá - Vía España, frente al Hospital San Fernando
Apartado Postal 0830 - 1596 Panamá, República de Panamá - (507)501-6000

Panama Public Registry

Technology, Quality and Registry Security

Panama Public Registry

Signed by: Umberto Elias Pedreschi Pimentel

Date: May 20, 2022 12:20:13-05:00

Reason: Publicity Request (Certificate of good standing)

Location: Panama, Panama

Certificate of legal person

In view of the request

199837/2022 (2) dated May 20, 2022

That the business

Ambers Associates CO. SA.

Type of Business: Anonymous Business

Is registered in (Mercantile) Folio Number 476944 (s) as of Monday, February 21, 2005.

-That the company is found valid.

-That their titles and responsibilities are:

Associate: Dulcan Inc.

Associate: Winsley Inc

Director: Pedro Alvarez Olivares

Director: Norah Capriles de Alvarez

Director: Fernando Alberto Alvarez Capriles

Director: Adriana Lucia Alvarez Capriles

Director: Pedro Manuel Alvarez Capriles

President: Pedro Alvarez Olivares

Vice President: Norah Capriles de Alvarez

Treasurer: Pedro Manuel Alvarez Capriles

Secretary: Fernando Alberto Alvarez Capriles

Sub-secretary: Adriana Lucia Alvarez Capriles

Resident Agent: Moreno & Arjona – Bureau

- That the legal representation shall be exercised:

The president and the treasurer or secretary may also exercise this position in the absence of the president or any person designated by the board of directors for that purpose.

-That its capital is \$10,000.00 US Dollars.

The capitol stock is of \$10,000.00 US dollars divided into 100 shares which may be nominative or bearer with a nominal value of \$100.00 dollars each.

-That its duration is perpetual.

-That the address is Panama, Panama Province.

Submitted entries that are in Process

There are no pending entries.

Custody Regime: According to the information registered in this registry, the company that is the object of the certificate has not accepted the custody regime.

Issued in the province of Panama on Friday, May 20, 2022 at 11:22 am. Note: this certification paid duties for a value of 30.00 balboas with the settlement number 1403509772.

Validate your electronic document through the QR Code printed in the footer or through the electronic identifier: DCA380AE-C375-4172-AE59-492B67590C4D.

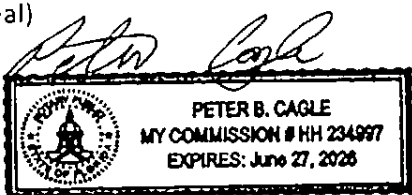
Public registry of Panama – via España, in front of San Fernando Hospital, PO Box 0830-1596, Panama, Republic of Panama – (507)501-6000.

State of Florida

County of Miami-Dade

Sworn to (or affirmed) and subscribed before me this 13th day of June, 2022, by Marie Cruz (name of person) Personally Known or produced identification . Type of identification Produced Drivers License

(Seal)



Peter Cagle
Signature of Notary Public

Peter Cagle
Print Name of Notary Public/Commission Expires