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Florida Department of State
Division of Corporations
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((H24000044718 3)))



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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : VIP ACCOUNTING & BUSINESS CONSULTING , LLC
Account Number : I20100000072
Phone : (954)228-2410
Fax Number : (954)228-2411

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: Vitor. Vitor.Bidart@VipBusiness.Com

**FOREIGN PROFIT/NONPROFIT CORPORATION
ASPENE INTERNATIONAL GROUP CO. LTD CORP.**

Certificate of Status	0
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CORPORATIONS
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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA****((H24000044718 3))**

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. ASPENE INTERNATIONAL GROUP CO. LTD 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. BRITISH VIRGIN ISLAND

(State or country under the law of which it is incorporated)

3. APPLIED FOR

(FEI number, if applicable)

4. JANUARY 23, 2024

(Date of incorporation)

5. PERPETUAL

(Date of duration, if other than perpetual)

6. UPON QUALIFICATION

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

7. 2255 GLADES RD STE 122-A - BOCA RATON, FL 33431

(Principal office street address)

SAME AS ABOVE

(Current mailing address, if different)

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

Name: **VIP ACCOUNTING & BUSINESS CONSULTING, LLC.**

Office Address: **2255 GLADES RD STE 122-A**

BOCA RATON, FL

(City)

Florida **33431**

(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]:

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A. DIRECTORS**(((H24000044718 3)))**

<input type="checkbox"/> Chairman	LUIS FERNANDO MONTEIRO DE GOUVEA Name: _____	<input type="checkbox"/> Chairman	LUIS FERNANDO ETCHENIQUE M.GOUVEA Name: _____
<input type="checkbox"/> Vice Chairman	Address: 2255 GLADES RD STE 122-A	<input type="checkbox"/> Vice Chairman	Address: 2255 GLADES RD STE 122-A
<input type="checkbox"/> Director	BOCA RATON, FL 33431	<input type="checkbox"/> Director	BOCA RATON, FL 33431
<input checked="" type="checkbox"/> President	_____	<input type="checkbox"/> President	_____
<input type="checkbox"/> Vice President	_____	<input checked="" type="checkbox"/> Vice President	_____
<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer	<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Chairman	Name: _____	<input type="checkbox"/> Chairman	Name: _____
<input type="checkbox"/> Vice Chairman	Address: _____	<input type="checkbox"/> Vice Chairman	Address: _____
<input type="checkbox"/> Director	_____	<input type="checkbox"/> Director	_____
<input type="checkbox"/> President	_____	<input type="checkbox"/> President	_____
<input type="checkbox"/> Vice President	_____	<input type="checkbox"/> Vice President	_____
<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer	<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Chairman	Name: _____	<input type="checkbox"/> Chairman	Name: _____
<input type="checkbox"/> Vice Chairman	Address: _____	<input type="checkbox"/> Vice Chairman	Address: _____
<input type="checkbox"/> Director	_____	<input type="checkbox"/> Director	_____
<input type="checkbox"/> President	_____	<input type="checkbox"/> President	_____
<input type="checkbox"/> Vice President	_____	<input type="checkbox"/> Vice President	_____
<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer	<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> 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. **LUIS FERNANDO MONTEIRO DE GOUVEA**

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

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**TERRITORY OF THE BRITISH VIRGIN ISLANDS
BVI BUSINESS COMPANIES ACT, 2004**

**CERTIFICATE OF GOOD STANDING
(SECTION 235)**



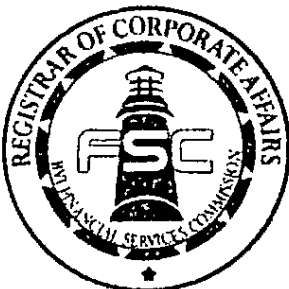
C1DD085A59

The REGISTRAR OF CORPORATE AFFAIRS, of the British Virgin Islands HEREBY CERTIFIES that, pursuant to the BVI Business Companies Act, 2004 at the date of this certificate, the company,

Aspene International Group Co. Ltd.

BVI COMPANY NUMBER: 1664509

1. Is on the Register of Companies;
2. Has paid all fees and penalties due under the Act;
3. Has filed its register of directors with the Registrar which is complete;
4. Has not filed articles of merger or consolidation that have not become effective;
5. Has not filed articles of arrangement that have not yet become effective;
6. Is not in voluntary liquidation;
7. Is not in liquidation under the Insolvency Act, 2003;
8. Is not in receivership under the Insolvency Act, 2003;
9. Is not in administrative receivership; and
10. Proceedings to strike the name of the company off the Register of Companies have not been instituted.



REGISTRAR OF CORPORATE AFFAIRS

30th day of January, 2024

((H24000044718 3)))

TERRITORY OF THE BRITISH VIRGIN ISLANDS
BVI BUSINESS COMPANIES ACT, 2004

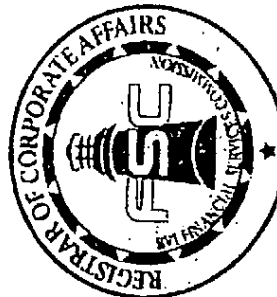
CERTIFICATE OF INCORPORATION
(SECTION 7)

The REGISTRAR of CORPORATE AFFAIRS, of the British Virgin Islands HEREBY CERTIFIES, that pursuant to the BVI Business Companies Act, 2004, all the requirements of the Act in respect of incorporation having been complied with,

Aspene International Group Co. Ltd.

BVI COMPANY NUMBER: 1664509

is incorporated in the BRITISH VIRGIN ISLANDS as a BVI BUSINESS COMPANY, this 4th day of August, 2011.



for REGISTRAR OF CORPORATE AFFAIRS
4th day of August, 2011