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## **COVER LETTER**

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: COLOMBIA	ANS USA INC					
- · · · · <u></u>	(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
Enclosed is an original a	and one (1) copy of the Art	icles of Incorporation and	a check for :			
≥ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Centified Copy & Centificate			
		ADDITIONAL CO	PY REQUIRED			
FROM:	HERNAN ORJUELA					
	Name (Printed or typed)					
	888 BRICKELL KEY DR APT 1104					
		Address	_			
	MIAMI, FL 33131					

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

866-296-1833

INFO@JCBSOLUTIONSINC.NET

NOTE: Please provide the original and one copy of the articles.

City, State & Zip

Daytime Telephone number

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I The name of the	NAME he corporation shall be:	COLOMBIANS U	JSA INC			
ARTICILE II						
888	Principal <u>street</u> add BRICKELL KEY DR	- · · · · · · · · · · · · · · · · · · ·				
MIA	AMI, FL 33131	<del> </del>	<del></del>	<del></del>	- · - · · · · -	
ARTICLE III The purpose for related media	I PURPOSE  For which the corporations; based in the United S	on is organized is:	Gather Colombian ta	lents from art, culture, music, and auc	tiovisual and	
each other thi	rough networking, ever	nts, and various act	ivities, and initiatives	5.		
		<u> </u>				
ARTICLE IV	MANNER OF FI	FCTION The ma	nner in which the dire	ctors are elected and appointed:	board of	
	be appointed by the o			ctors are elected and appointed.		
ARTICILE V	INITIAL OFFICE	RS AND/OR DIRE	CTORS			
	le:_Heman Orjuela - Di		Name and Title	Nancy P. Valderruten Castillo-Direc	tor	
Address	888 Brickell Key Dr		Address:	888 Brickell Key Dr. # 1104		
TRACTOS	Miami, Fl. 33131		/ rudicss.	Miami, Fl. 33131		
		•			<del></del>	
Name and Titl	le:		Name and Title		2022 S£∱:	
Address			Address:		2022 HAR	
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Name : d Title:		Name and Title:		
Address _		Address:	·······	
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Name and Title:		Name and Title:		
Address _		Address:		
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_		<del></del>		
ARTICLE VI	REGISTERED AGENT			
The name and F	orida street address (P.O. Box NOT acc	eptable) of the registered agent	is:	
Name:	JC Business Solutions Inc	<del></del>		
Address:	7500 NW 25th ST Suite 237			
	Doral, FL 33122			
	INCORPORATOR			
The <u>name and ac</u>	idress of the Incorporator is:			
Name:	Heman Orjuela	<del></del>		
Address:	888 Brickell Key Dr. # 1104	<del></del>		
	Miami, Fl. 33131			
ARTICLE VIII	EFFECTIVE DATE:			
Effective date, if	other than the date of filing:	(OPT	TONAL)	
(If an effective d	ate is listed, the date must be specific a	and cannot be more than five	e days prior or 90 days after	the filing.)
Note: If the date document's effec	inserted in this block does not meet the live date on the Department of State's re	applicable statutory filing requeeords.	tirements, this date will not be	listed as the
Having been nan certificate, I am fe	ned as registered agent to accept service imiliar with and accept the appointment	e of process for the above sta as registered agent and agree	ted corporation at the place a to act in this capacity	lesignated in thi
	( A1)		02/21/5	2027
<del>-</del>	Required Signature of Registere	d Agent	02/24/2 Date	<u> </u>
I submit this docu	ment and affirm that the facts stated her	ein are true. I am aware that a	ny false information submitted	'in a document to
the Department o	State constitutes a third degree felony a	s provided for in s.817.155, F.S.	<b>S.</b>	
	Required Signature of Inco	prporator	<u> </u>	<del></del>