

N23000013203

Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
ONE PRPS INC**

Certificate of Status	0
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ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAMEThe name of the corporation shall be: ONE PRPS INC**ARTICLE II PRINCIPAL OFFICE**Principal street address:1101 BRICKELL AVESOUTH TOWER 8 FLOORMIAMI, FL 33131

Mailing address, if different is:

1101 BRICKELL AVESOUTH TOWER 8 FLOORMIAMI, FL 33131**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: exclusively for charitable within the meaning ofSection 501(c)(3) of the Internal Revenue Code of 1986**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: _____As provided for in the bylaws**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Juan Diego Caballero - President

Address

1101 BRICKELL AVESOUTH TOWER 8 FLOORMIAMI, FL 33131Name and Title: Milena Abigail Caballero - VicePresident

Address:

1101 BRICKELL AVESOUTH TOWER 8 FLOORMIAMI, FL 33131Name and Title: Mirlaine Almeida de Caballero - Teasure Name and Title: _____

Address

1101 BRICKELL AVESOUTH TOWER 8 FLOORMIAMI, FL 33131

Address:

Name and Title: _____

Address

Name and Title: _____

Address: _____

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Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:Name: GRUPO RED INTERNATIONAL CORPORATIONAddress: 1101 BRICKELL AVESOUTH TOWER 8 FLOOR, MIAMI, FL 33131**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: JUAN DIEGO CABALLEROAddress: 1101 BRICKELL AVESOUTH TOWER 8 FLOOR, MIAMI, FL 33131

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Required Signature of Registered Agent

I submit this document and affirm that the facts stated herein are true. I am aware that any 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.

Required Signature of Incorporator

11-01-2023

Date

11-01-2023

Date

11-01-2023

Date

11-01-2023

Date

11-01-2023

Date

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