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TRANSMITTAL LETTER

FILED

02 AUG -5 PM 2:40

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT:

LatinClips, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

400006898324--2

-08/05/02--01061--008

*****87.50 *****87.50

Enclosed are an original and one (1) copy of the articles 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,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

Manuel Ruiz

Name (Printed or typed)

12110 SW 105 Ter.

Address

Miami, FL 33186

City, State & Zip

305.971.2622

Daytime Telephone number

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

WE 8-6-02 2

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

LatinClips, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

13205 SW 137 Ave.
Suite 229
Miami, FL 33186

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to conduct all the business activities permitted under the laws of the state of Florida and the United States of America.

ARTICLE IV SHARES

The number of shares of stock is:

500 shares at \$1

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Manuel Ruiz, 12110 SW 105 Ter., Miami, FL 33186, Chairman
Christy Clavijo-Kish, 9133 Dickens Ave., Surfside, FL 33154, CEO
Dalia Salazar, 20740 SW 81st Ave, Miami, FL 33189, President

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Manuel Ruiz
12110 SW 105 Ter.
Miami, FL 33186

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Manuel Ruiz

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

Signature/Registered Agent

Date

Signature/Incorporator

Date