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Florida Department of State
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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : BUSINESS WORLD TRANSACTIONS, INC.
Account Number : 104512000707
Phone : (305) 803-2736
Fax Number : (786) 462-4950

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
ALPE UNLIMITED, CORP.

Certificate of Status	0
Certified Copy	0
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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I

NAME

The name of the corporation shall be: ALPE UNLIMITED, CORP.

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

753 N.W. 3 STREET #205
MIAMI, FL. 33128

ARTICLE III

SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: One Thousand (1,000) shares of One Dollar (\$1.00) par value common stock, which shall be designated "COMMON SHARES."

ARTICLE IV

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GUSTAVO ALCARAZ
753 N.W. 3 STREET #205
MIAMI, FL. 33128

Prepared by: GUSTAVO ALCARAZ
753 N.W. 3 STREET #205
MIAMI, FL. 33128
786 426-5723

Electronically Sent By: BUSINESS LICENSES, INC.
7951 S.W. 40 ST. (BIRD RD.) #201
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**ARTICLE V
INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

GUSTAVO ALCARAZ
753 N.W. 3 STREET #205
MIAMI, FL. 33128

DIRECTOR & PRESIDENT

CONCEPCION RAMI
753 N.W. 3 STREET #205
MIAMI, FL. 33128

VICE PRESIDENT

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

03 day of JUNE, 2010.



Signature

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: ALPE UNLIMITED, CORP.

2. The name and address of the registered agent and office is:

GUSTAVO ALCARAZ
753 N.W. 3 STREET #205
MIAMI, FL. 33128

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(SIGNATURE)

(DATE) 06-03-10

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