

COVER LETTER

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

SUBJECT: INVERSIONES TWINS, CORP

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: Luis Arturo Vidal

Name (Printed or typed)

4186 Staghorn Lane, Weston, FL 33331

Address

Weston, FL 33331-3804

City, State & Zip

305-450-9255

Daytime Telephone number

invertwins@gmail.com

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

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

INVERSIONES TWINS, CORP

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

4186 Staghorn Lane, Weston, FL 33331

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Wholesale and Retail

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Giuseppina Del Luca	Luis A Vidal
4186 Staghorn Lane,	4186 Staghorn Lane,
Weston, FL 33331	Weston, FL 33331
President	Vice-President

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Luis A Vidal 4186 Staghorn Lane, Weston, FL 33331

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Pedro Jimenez
16510 SW 81st Ave, Miami, FL 33157

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



Signature/Incorporator

FILED
2010 SEP -2 PM 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08/31/2010

Date

08/31/2010

Date