

03/08/2010 05:02

2560 P.01/002

**P1200039388**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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**FLORIDA PROFIT/NON PROFIT CORPORATION  
AGROPECUARIA ALCARAVAN C.A., INC**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 1       |
| Page Count            | 02      |
| Estimated Charge      | \$78.75 |

Electronic Filing Menu

Corporate Filing Menu

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4/26/2012

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#5609 P.002/002  
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DIVISION OF CORPORATIONS

**ARTICLES OF INCORPORATION**

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

APR 26 AM 11:25

**ARTICLE I NAME**

The name of the corporation shall be:

**AGROPECUARIA ALCARAVAN C.A., INC**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

**10904 NW 58 TERR  
DORAL, FL 33178**

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**TO ENGAGE IN ANY AND ALL LAWFUL BUSINESS OR ACTIVITY PERMITTED UNDER THE LAWS OF THE UNITED STATES AND THE STATE OF FLORIDA.**

**ARTICLE IV SHARES**

The number of shares of stock is: **100**

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: **FELIX LORETO**

Address: **10904 NW 58 ST  
DORAL, FL 33178**

Name and Title:

Address:

Name and Title: **AQUILES J LORETO ALFONSO**

Address: **10904 NW 58 TERR  
DORAL, FL 33178**

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

**ARTICLE VI REGISTERED AGENT**

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

Name: **FELIX LORETO**

Address: **10904 NW 58 ST  
DORAL, FL 33178**

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

Name: **FELIX LORETO**

Address: **10904 NW 58 ST  
DORAL, FL 33178**

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 Registered Agent

4/26/12

Date

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

4/26/12

Date

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