

P14000056884

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H14000157677 3)))



H140001576773ABC5

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : CORP USA  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (786) 409-5946

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

Email Address: \_\_\_\_\_

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 JUL - 1 PM 1:29

APPROVED  
AND  
FILED

**FLORIDA PROFIT/NON PROFIT CORPORATION  
GOMESA INTERNATIONAL CORPORATION**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

76915

TALLAHASSEE, FLORIDA

14 JUL - 1 PM 1:01

RECORDED

10

Electronic Filing Menu

Corporate Filing Menu

Help

11/14

H14000151411

(9)

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: GOMESA INTERNATIONAL CORPORATION

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

12500 SW 6TH ST. N-110  
PENNAPOKE PINES, FL. 33027

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL  
BUSINESS

**ARTICLE IV SHARES**

The number of shares of stock is: 28 SHARES - VALUE \$1.000<sup>00</sup> EACH

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

Name and Title: RONALDO GOMEZ

Name and Title: \_\_\_\_\_

Address: KRA-1<sup>a</sup> No. 28-70

Address: \_\_\_\_\_

EDIFICIO BAHIA LINDA

APT. 1402 A:  
STA MARTA - COLOMBIA

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 JUL - 1 PM 1:29

APPROVAL  
AND  
FILED

APPROVAL  
AND  
FILED (cont.)

14 JUL -1 PM 1:29

Name and Title: _____	Name and Title: <u>SECRETARY OF STATE</u>
Address _____	Address: <u>TALLAHASSEE, FLORIDA</u>
_____	_____
_____	_____

**ARTICLE VI REGISTERED AGENT**

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

Name: NORA ROSADO  
Address: 12500 SW 6<sup>TH</sup> ST. APT. N-110  
PEMBROKE PINES, FL 33027

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: ROMUALDO GOMEZ  
Address: KRA 13 + 28-70 Edificio BRAVO LINDA APT-1402  
STA MARTA - COLOMBIA

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

Nora Rosado  
Required Signature/Registered Agent

07/01/2014  
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.817.153, F.S.

R Gomez  
Required Signature/Incorporator

07/01/14  
Date