

P15000052034

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CLERK OF STATE
ALLIANCE FOR THE
COMMONWEALTH

6/17/15

COVER LETTER

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

SUBJECT: COINSA, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Juan A. Guzman

Name (Printed or typed)

18091 SW 134 CT

Address

Miami, FL 33177

City, State & Zip

(305) 301-8648

Daytime Telephone number

troplant@gmail.com

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

RECEIVED
JUN 12 2015

15 JUN 12 PM 2:59

FILED

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



RECEIVED

15 JUN 12 AM 11:58

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 3, 2015

JUAN A. GUZMAN
18091 SW 134 CT
MIAMI, FL 33177

SUBJECT: COINSA, CORP
Ref. Number: W15000038890

We have received your document for COINSA, CORP and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The effective date is not acceptable since it is not within five working days of the date of receipt.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 015A00011682

FILED
15 JUN 12 PM 3:00
TALLAHASSEE, FLORIDA

EFFECTIVE DATE 06/17/15

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: COINSA, CORP

FILED

15 JUN 12 PM 3:00

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is: STATE OF FLORIDA

18091 SW 134 CT

Miami, FL 33177

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Import and Export of goods to and from the united States of America
(USA) and its territories, as well as other business legally permitted by the laws of the Unite Staers of America.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Carlos A. Guzman, President, Director

Address: 18091 SW 134 CT

Miami, FL 33177

Name and Title: Isaac Suero, Secretary, Director

Address: 18091 SW 134 CT

Miami, FL 33177

Name and Title: Armando A. Guzman, VP, Director

Address: 18091 SW 134 CT

Miami, FL 33177

Name and Title: Juan A. Guzman, Treasurer, Director

Address: 18091 SW 134 CT

Miami, FL 33177

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Juan A. Guzman
Address: 18091 SW 134 CT
Miami, FL 33177

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Juan A. Guzman
Address: 18091 SW 134 Ct
Miami, FL 33177

FILED
15 JUN 12 PM 3:00
CLERK OF THE
SUPREME COURT
JANET L. HARRIS

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 06/17/2015. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

6/8/2015

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

6/8/2015

Date