

P1500066747

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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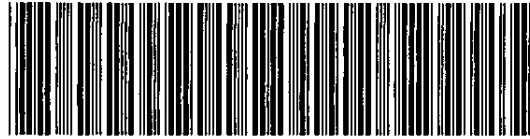
(Business Entity Name)

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APPROVED
AND
FILED
15 AUG -5 AM 8:19
SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

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

SUBJECT: LATIN AMERICAN IRRIGATION INTERNATIONAL INC.

(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: JOSE ANTONIO PEREZ LOPEZ
Name (Printed or typed)
1720 MANOR AVENUE
Address
WEST PALM BEACH, FLORIDA 33409
City, State & Zip
561 319-2537
Daytime Telephone number
ptjoseperezlopez@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)

APPROVED
AND
FILED

ARTICLE I NAME

The name of the corporation shall be: LATIN AMERICAN IRRIGATION INTERNATIONAL INC.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, TALLAHASSEE FLORIDA

1720 MANOR AVENUE

WEST PALM BEACH, FLORIDA 33409

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: THE FUNCTIONS OF THIS CORPORATION AND ITS FOREIGN

SUBSIDY ENTAILS THE MARKETING AND DEVELOPMENT OF PRODUCTS SUCH AS FUNNY PIPES

FOR GLOBAL WHOLESALE DISTRIBUTION.

ARTICLE IV SHARES

The number of shares of stock is: 25

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOSE ANTONIO PEREZ LOPEZ

Name and Title: _____

Address PREDIDENT

Address: _____

1720 MANOR AVENUE

WEST PALM BEACH, FLORIDA 33409

Name and Title: ERLENDY DIAS

Name and Title: _____

Address VICE PRESIDENT

Address: _____

1720 MANOR AVENUE

WEST PALM BEACH, FLORIDA 33409

Name and Title: OSBAL PEREZ LOPEZ

Name and Title: _____

Address SECRETARY/TREASURER

Address: _____

1720 MANOR AVENUE

WEST PALM BEACH, FLORIDA 33409

APPROVED
AND
FILED

15 AUG -5 AM 8:19

Name and Title: _____	Name and Title: _____
Address _____	Address: <u>SECRETARY OF STATE</u>
_____	<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: JOSE ANTONIO PEREZ LOPEZ

Address: 1720 MANOR AVENUE

WEST PALM BEACH, FLORIDA 33409

ARTICLE VII INCORPORATOR

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

Name: JOSE ANTONIO PEREZ LOPEZ

Address: 1720 MANOR AVENUE

WEST PALM BEACH, FLORIDA 33409


ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____. (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

	07/27/2015
_____ Required Signature/Registered Agent	_____ 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.

	07/27/2015
_____ Required Signature/Incorporator	_____ Date