

Division of Corporations
Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : CORP USA
Account Number : 072450003255
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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SEP 16 AM 11:06

**FLORIDA PROFIT/NON PROFIT CORPORATION
UVERAL INTERNATIONAL CORP.**

Certificate of Status	0
Certified Copy	1
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Electronic Filing Menu

Corporate Filing Menu

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SEP 19 2015

T. SCOTT

COVER LETTER

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

SUBJECT: UVERAL INTERNATIONAL 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: SINECIO B. SAHDALA
Name (Printed or typed)
13313 SW 124TH STREET
Address
MIAMI, FL 33186
City, State & Zip
305-238-0487
Daytime Telephone number
STRANSWORLD@BELLSOUTH.NET
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 UVERAL INTERNATIONAL CORP.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address

Mailing address, if different is:

13313 SW 124TH STREET

MIAMI, FL 33186

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to transact any and all
lawful business.

ARTICLE IV SHARES 100 \$100.00 per value
The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Rafael A. Taveras Lara Pres/Treas.

Address: 13313 SW 124TH STREET

MIAMI, FL 33186

Name and Title: Rafael A. Taveras Marte Vice-Pres/Sec

Address: AVE. ORTEGA Y GASSET #16

SANTO DOMINGO

DOMINICAN REPUBLIC

Name and Title: Name and Title:

Address: Address:

16 SEP 16 AM 11:06

(cont.)

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: SINECIO B. SAHDALA
Address: 13830 SW 109 STREET
MIAMI, FL 33186

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: SINECIO B. SAHDALA
Address: 13830 SW 109 STREET
MIAMI, FL 33186

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

Sinecio B. Sahdala
Required Signature/Registered Agent

09-16-16
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted to a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Sinecio B. Sahdala
Required Signature/Incorporator

09-16-16
Date