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COVER LETTER

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

SUBJECT: #	RST CORPORATE	TENAME - MUST INCLU	MSPORTATI UDE SUFFIX)
Enclosed are an original	inal and one (1) copy of the art	icles of incorporation and	l 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
·	•	ADDITIONAL CO	
FROM:	Cielo Sa	GZQ(. e (Printed or typed)	
	1461 DERO	Address	
	Orla, City	ndo FC 326, State & Zip	837
•	407-	856-4272 Telephone number	
	Colombia E-mail address: (to be use	Products & GM ed for future annual report	14, L. com

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)

ne of the corporation shall <u>LE II PRINCIPAL O</u>	be: FIRST COR'PE		
	ll <u>street</u> address	Mailing add	ress, if different is:
1 Joury 0.8:1	- Suint A 107		
rdo, FL 328.	37		
LE III PURPOSE pose for which the corpo	ration is organized is: 16	Creame los opportus	ntes
		<u> </u>	
	jo0		
LE V INITIAL OFFI	ICERS AND/OR DIRECTORS		Decree - Constitution of the Constitution of t
nber of shares of stock is: LE V INITIAL OFFI Name and Title: C	icers and/or directors	Name and Title:	
nber of shares of stock is: LE V INITIAL OFFI Name and Title: C	ICERS AND/OR DIRECTORS	Name and Title:	
nber of shares of stock is: LE V INITIAL OFFI Name and Title: C	icers and/or directors	Name and Title:	
nber of shares of stock is: LE V INITIAL OFFI Name and Title: C	iclo Salazar (P) Deroy Glev Dr ndo, fl 32837	Name and Title:	
Name and Title: Name and Title:	iclo Salazar (P) Deroy Glev Dr ndo, fl 32837	Name and Title: Address: Name and Title:	
Name and Title: Name and Title:	iclo Salazar (P) Deroy Glew Dr. nob, fl 32837	Name and Title: Address: Name and Title:	
Name and Title: Name and Title: Address Name and Title: Address	iclo Salazar (P) Deroy Glew Dr. nob, fl 32837	Name and Title: Address: Name and Title: Address:	
Name and Title: Name and Title: Address Name and Title: Address	iclo Salazar (P) Dercy Glew Dr ndo, Fl 32837	Name and Title: Address: Name and Title: Address:	
Name and Title: Address Name and Title: Name and Title: Name and Title:	iclo Salazar (P) Dercy Glew Dr ndo, Fl 32837	Name and Title:	

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 quent ice
Name: Cielo Salazar	
Address: 1461 DERBY GLE Oxlando DL 326	3 27
Chanco, ro se.	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Name: _ Cielo Sal	G Z OX
Name: Cielo Sal Address: 11301 SOUTH O.	B.T SUIT A107
Orlando, FL	
ARTICLE VIII EFFECTIVE DATE:	
Effective date, if other than the date of filing:	(OPTIONAL)
days after the filing.)	specific and cannot be more than five business days prior or 90 business
Note: If the date inserted in this block does not the document's effective date on the Department	meet the applicable statutory filing requirements, this date will not be listed as of State's records.
Having been named as registered agent to accept this certificate, I am familiar Vith and accept the	ot service of process for the above stated corporation at the place designated in appointment as registered agent and agree to act in this capacity
(RIV//	N2 4-3-17
Dequired Signature/Re	
I submit this document and affirm/that the fact document to the Deportment of State constitutes	ts stated herein are true. I am aware that the false information submitted in a a third degree felony as provided for in s.817.155, F.S.
_(leilorlad	4-7-17
Required Signarure/Incorporator	Date