

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

P1700045654

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

From: Account Name : FASTKIT CORP
Account Number : I20100000009
Phone : (305) 599-0839
Fax Number : (305) 592-9591

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

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
UWI TROPICAL ORGANIC CORP**

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

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MAY 24 2017

K. Brumbley

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: UWI TROPICAL ORGANIC CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4361 SW 147 CT

4361 SW 147 CT

MIAMI, FL 33185

MIAMI, FL 33185

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ORGANIC PRODUCTS IMPORT & DISTRIBUTIONS

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ESTEFANIA MORI

Name and Title: _____

Address 4361 SW 147 CT

Address: _____

MIAMI, FL 33185

PRESIDENT (50 SHARES)

Name and Title: ANA CRISTINA LOPEZ VELEZ

Name and Title: _____

Address JAIME SALVADOR CAMPUZANO

Address: _____

TUMBACO, ECUADOR

VICE-PRESIDENT (50 SHARES)

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

FILED
17 MAY 23 AM 9:07
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

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: ESTEFANIA MORI
Address: 4361 SW 147 CT
MIAMI, FL 33185

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ESTEFANIA MORI
Address: 4361 SW 147 CT
MIAMI, FL 33185

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: MAY 22, 2017 (OPTIONAL)

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

x [Signature]
Required Signature/Registered Agent

MAY 22, 2017

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.

x [Signature]
Required Signature/Incorporator

MAY 22, 2017

Date