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Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

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

From:

Account Name : JP GLOBAL BUSINESS
Account Number : 120130000883
Phone : (305)359-3700
Fax Number : (786)217-1243

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

Email Address: master@jpbusiness.com

**FLORIDA PROFIT/NON PROFIT CORPORATION
DROGUERIA VENEZUELA CA INC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

N. SAMS

NOV 27 2017

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BUREAU OF COMMERCIAL
INFORMATION SERVICES

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Electronic Filing Menu

Corporate Filing Menu

Help

((H170003081023)))

November 21st, 2017

Florida Department of State


Attention: New Filings Section

To whom it may concern:

This is to advise you that the owners of **DROGUERIA VENEZUELA CA INC** of Doc # **P12000098351** are the same owners of the attached articles of incorporation. We have dissolved the company and have no intention of reopening it. We want to open a new one, with a different Document number.

Thank you for your help in this matter.

Very sincerely


A handwritten signature in cursive script, appearing to read 'CUP', is written over a horizontal line.

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COVER LETTER ((CH170003081023)))

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

SUBJECT: DROGUERIA VENEZUELA CA 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 ☐ \$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: SONIA BOTERO
Name (Printed or typed)
1395 BRICKELL AVE SUITE 1380
Address
MIAMI FL 33131
City, State & Zip
(305)359-3700
Daytime Telephone number
MASTER@JPGBUSINESS.COM
E-mail address: (to be used for future annual report notification)

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

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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ARTICLE I NAMEThe name of the corporation shall be: DROGUERIA VENEZUELA CA INC**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address

Mailing address, if different is:

7011 NW 114TH CT7011 NW 114TH CTDORAL FL 33178DORAL FL 33178**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: Import, export and distribution of medical equipment**ARTICLE IV SHARES**The number of shares of stock is: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: P/CAMINO, ROMULO F

Name and Title: _____

Address

7011 NW 114TH CT

Address: _____

DORAL FL 33178

Name and Title: _____

Name and Title: _____

Address

Address: _____

Name and Title: _____

Name and Title: _____

Address

Address: _____

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

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: JP GLOBAL BUSINESS SOLUTIONS INC
Address: 1395 BRICKELL AVE STE 1380
MIAMI FL 33131

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: ROMULO F CAMINO
Address: 7011 NW 114TH CT
DORAL FL 33178

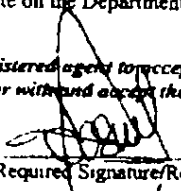
ARTICLE VIII EFFECTIVE DATE:Effective date, if other than the date of filing: 11/22/2017

(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



Required Signature/Registered Agent11/22/2017
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.



Required Signature/Incorporator11-22-17
Date

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