

P19000020335

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

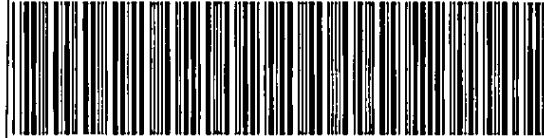
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2019 MAR -4 AM 10:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 12 2019

K. Brumbley

COVER LETTER

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

SUBJECT: INTERNATIONAL FOOD PROMOTIONS, 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: IRASEMA ARAUZ

Name (Printed or typed)

8180 NW 36th ST STE 406

Address

DORAL, FL 33166

City, State & Zip

(305) 406-3800

Daytime Telephone number

ATPLUS@LIVE.COM

E-mail address: (to be used for future annual report notification)

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

AFFIDAVIT

BEFORE ME, the undersigned authority, on this day personally appeared **VICENZO PERILLI**, who after being firstly duly sworn, under oath, deposes and says:

1. The undersigned is also the sole Director and the President of **INTERNATIONAL FOOD PROMOTIONS INC**, a Florida corporation to be filed with the Florida Department of State on or about **February 27, 2019**.
2. The undersigned hereby consents to and authorizes the use by **INTERNATIONAL FOOD PROMOTIONS INC**, of the name **INTERNATIONAL FOOD PROMOTIONS INC**.
3. The undersigned has personal knowledge of the fact and matter set forth herein and therefore has no intentions of reinstating the dissolved entity.

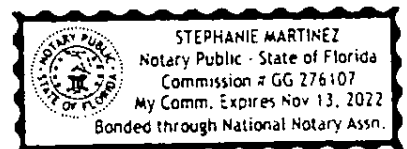
FURTHER AFFIANT SAYETH NAUGHT.


VICENZO PERILLI

STATE OF FLORIDA)
) SS:
COUNTY OF MIAMI-DADE)

PERSONALLY appeared before me, Vincenzo Perilli, who is personally known to me, who being by my first duly sworn, acknowledges that he signed the foregoing for the purposes therein expressed.

Witness my hand and official seal this 27th day of February, 2019.




Notary Public Signature

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: INTERNATIONAL FOOD PROMOTIONS, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

16400 NE 17th AVE

STE 505

NORTH MIAMI BEACH, FL 33162

Mailing address, if different is:

16400 NE 17th AVE

STE 505

NORTH MIAMI BEACH, FL 33162

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: DISTRIBUTION OF SEAFOOD AND PASTA

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: VINCENZO PERILLI / PRESIDENT

Address 16400 NE 17th AVE

STE 505

NORTH MIAMI BEACH, FL 33162

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:

Name: VINCENZO PERILLI

Address: 16400 NE 17th AVE STE 505

NORTH MIAMI BEACH, FL 33162

ARTICLE VII INCORPORATOR

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

Name: VINCENZO PERILLI

Address: 16400 NE 17th AVE STE 505

NORTH MIAMI BEACH, FL 33162

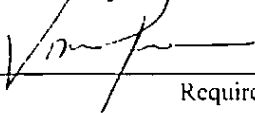
ARTICLE VIII EFFECTIVE DATE: 02/20/2019

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 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

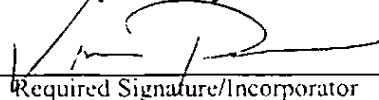


Required Signature/Registered Agent

02/20/19

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/Incorporator

02/20/19

Date