

P19000060870

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

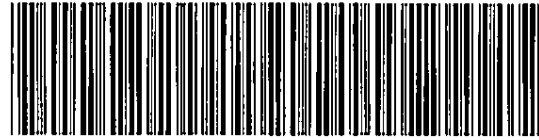
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400331915094

07/23/19--01012--014 \*\*128.75

FILED  
2019 JUL 23 AM 11:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 07 2019

K Brumbley

## COVER LETTER

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

SUBJECT: COBRO LATINO, INC.

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

### FEES:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

### OPTIONAL:

Certificate of Status	\$ 8.75
-----------------------	---------

EDUARDO MENDEZ

Name (printed or typed)

2600 S. DOUGLAS RD., SUITE 501

Address

CORAL GABLES, FL 33134

City, State & Zip

305-742-2800

Daytime Telephone Number

jvalderrama@mmco-cpa.com

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

## CERTIFICATE OF DOMESTICATION

The undersigned, LUIS MONTES DE OCA, PRESIDENT  
(Name) (Title)

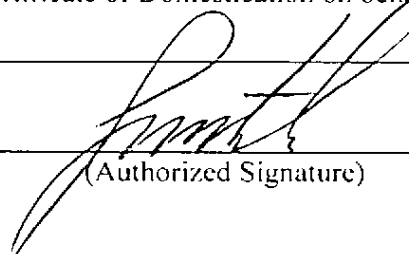
of COBRO LATINO, INC. a foreign corporation,  
(Corporation Name)

in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was MARCH 12, 2014.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was TEXAS.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was COBRO LATINO, INC.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is COBRO LATINO, INC.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was TEXAS.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am LUIS MONTES DE OCA, of COBRO LATINO, INC.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 9TH day of JULY, 2019.

  
(Authorized Signature)



Filing Fee:	
Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

FILED  
2019 JUL 23 AM 11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**  
*IN COMPLIANCE WITH CHAPTER 607, F.S.*

**ARTICLE I    NAME**

*THE NAME OF THE CORPORATION SHALL BE:*

COBRO LATINO, INC.

---

**ARTICLE II    PRINCIPAL OFFICE**

*THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:*

Principal Address

Mailing Address

3250 NE 1ST AVENUE

---

3250 NE 1ST AVENUE

---

SUITE 323

---

SUITE 323

---

MIAMI, FL 33137

---

MIAMI, FL 33137

---

**ARTICLE III    PURPOSE**

*THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:*

THE PURPOSE OF THE CORPORATION IS TO ENGAGE  
IN ANY LAWFUL ACTIVITY FOR WHICH CORPORATIONS  
MAY BE INCORPORATED IN THIS STATE.

---

---

---

---

---

---

---

---

---

---

**ARTICLE IV    SHARES**

THE NUMBER OF SHARES OF STOCK IS: 1,000

**ARTICLE V   INITIAL DIRECTORS AND/ OR OFFICERS**

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Title/Name

PRESIDENT, TREASURER, AND SECRETARY

LUIS MONTES DE OCA

18218 MANTLE DR., SAN ANTONIO, TX 78258

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

Title/Name

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX **NOT** ACCEPTABLE) OF THE REGISTERED AGENT IS:

\_\_\_\_\_  
MENDEZ MOLIERI & COMPANY LLC

\_\_\_\_\_  
2600 S. DOUGLAS RD., SUITE 501

\_\_\_\_\_  
CORAL GABLES, FL 33134

**ARTICLE VII INCORPORATOR**

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

\_\_\_\_\_  
LUIS MONTES DE OCA

\_\_\_\_\_  
18218 MANTLE DR.

\_\_\_\_\_  
SAN ANTONIO, TX 78258

\*\*\*\*\*

HAVING BEEN NAMED AS REGISTERED AGENT AND 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.

\_\_\_\_\_  
Signature/Registered Agent

\_\_\_\_\_  
Date

7-12-19

\_\_\_\_\_  
Signature/Incorporator

\_\_\_\_\_  
Date

7-12-19

