

From: Robert Fanjul  
9/11/2019

Fax: 18775036086

To:

Fax: (850) 617-6381  
Division of Corporations

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## Florida Department of State

Division of Corporations  
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**To:**

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

**From:**

Account Name : FANJUL CPA, INC.  
Account Number : I20130000039  
Phone : (305)603-8791  
Fax Number : (877)503-6086

**\*\*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 CHIMBOTE CITY CORP

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SEP 12 2019

**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: CHIMBOTE CITY CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address7745 CARLYLE AVENUE APT 4MIAMI BEACH, FL 33141

Mailing address, if different is:

7745 CARLYLE AVENUE APT 4MIAMI BEACH, FL 33141**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL PURPOSES**ARTICLE IV SHARES**The number of shares of stock is: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: LUIS J PUENTE-PAddress: 7745 CARLYLE AVENUE APT 4MIAMI BEACH, FL 33141

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

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Name and Title: \_\_\_\_\_

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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: LUIS J PUENTE  
Address: 7745 CARLYLE AVENUE APT 4  
MIAMI BEACH, FL 33141

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**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: LUIS J PUENTE  
Address: 7745 CARLYLE AVENUE APT 4  
MIAMI BEACH, FL 33141

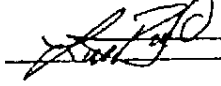
**ARTICLE VIII EFFECTIVE DATE:**

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.

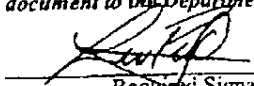
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*



Required Signature/Registered Agent

9/11/19  
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

9/11/19  
Date