

P 19000072978

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

((H19000286161 3)))



H190002861613ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : 12000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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
PENTAGRO, CORP

S TALLENT

SEP 25 2019

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: PENTAGRO, CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

490 W. PARK DR. APT 204490 W. PARK DR. APT 204MIAMI, FL 33172MIAMI, FL 33172**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: P: OSCAR A. ORTEGANO BELANDRIAName and Title: VP: ERIKA Y. DOS SANTOS BOLIVARAddress 490 W. PARK DR.Address: 490 W. PARK DR.APT: 204APT: 204MIAMI, FL 33172MIAMI, FL 33172

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: OSCAR A. ORTEGANO BELANDRIA
Address: 490 W. PARK DR. APT 204
MIAMI, FL 33172

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: OSCAR A. ORTEGANO BELANDRIA
Address: 490 W. PARK DR. APT 204
MIAMI, FL 33172

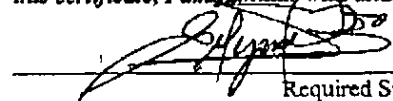
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 09/24/2019 (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

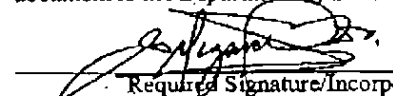


Required Signature/Registered Agent

09/24/2019

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

09/24/2019

Date