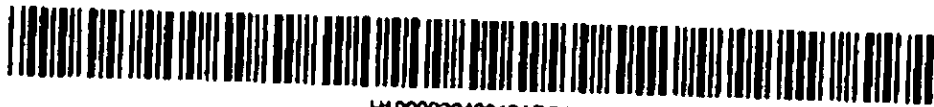


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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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.

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To:

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

From:

Account Name : RIVEROS CORP.  
Account Number : I20190000048  
Phone : (305)507-8464  
Fax Number : (954)533-1785

\*\*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  
INNOVA VIAJES Y TURISMO INC

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 03      |
| Estimated Charge      | \$70.00 |

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Electronic Filing Menu

Corporate Filing Menu

Help

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# 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: INNOVA VIAJES Y TURISMO INC

## ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

1820 N CORPORATE LAKES BLVD, SUITE 204

WESTON, FL 33326

Mailing address, if different is:

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY LAWFULL BUSINESS ACTIVITY

## ARTICLE IV SHARES

The number of shares of stock is: 100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: RUIZ ZULY, PRE

Address: 1820 N CORPORATE LAKES BLVD  
SUITE 204  
WESTON, FL 33326

Name and Title: MONTENEGRO JOSE, PRE

Address: 1820 N CORPORATE LAKES BLVD  
SUITE 204  
WESTON, FL 33326

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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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: ZULMA RIVEROS  
Address: 1820 N CORPORATE LAKES BLVD, STE 204  
WESTON, FL 33326

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: JOSE MONTENEGRO  
Address: 1820 N CORPORATE LAKES BLVD, STE  
WESTON, FL 33326

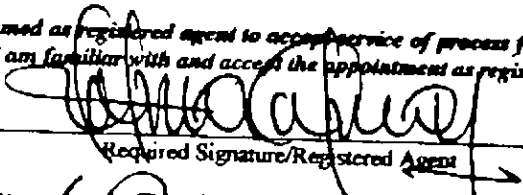
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 10/02/2019 (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.

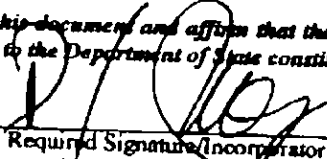
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

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

10/02/2019

\_\_\_\_\_  
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

10/02/2019

\_\_\_\_\_  
Date

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