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FLORIDA PROFIT/NON PROFIT CORPORATION  
INVERSIONES Y REPRESENTACIONES G&B CORP

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

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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: INVERSIONES Y REPRESENTACIONES G&B CORP

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

8160 GENEVA CT. #104

8160 GENEVA CT. #104

DORAL, FL 33167

DORAL, FL 33167

**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: GABRIEL E. BOSCAN SEMPRUN

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

Address 8160 GENEVA CT. #104

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

DORAL, FL 33167

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

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

Address \_\_\_\_\_

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

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

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: GABRIEL E. BOSCAN SEMPRUN

Address: 8160 GENEVA CT. #104  
DORAL, FL 33167

**ARTICLE VII INCORPORATOR**

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

Name: GABRIEL E. BOSCAN SEMPRUN

Address: 8160 GENEVA CT. #104  
DORAL, FL 33167


**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 01/14/2020 (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*

X  \_\_\_\_\_ 01/14/2020  
 Required Signature/Registered Agent 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.*

X  \_\_\_\_\_ 01/14/2020  
 Required Signature/Incorporator Date