

P20000007504

Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
INVERSIONES ALANDI, INC

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 NAMEThe name of the corporation shall be: INVERSIONES ALANDI, INC**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

10075 MOORSHIRE CR10075 MOORSHIRE CRORLANDO, FL. 32829ORLANDO, FL. 32829**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: LLANDI DI MICHELEName and Title: VP: JOSE C. DA COSTAAddress: 10075 MOORSHIRE CRAddress: 10075 MOORSHIRE CRORLANDO, FL. 32829ORLANDO, FL. 32829

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: LLANDI DI MICHELE
Address: 10075 MOORSHIRE CR
ORLANDO, FL. 32829

ARTICLE VII INCORPORATORThe **name and address** of the Incorporator is:

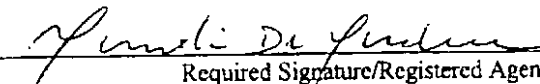
Name: LLANDI DI MICHELE
Address: 10075 MOORSHIRE CR
ORLANDO, FL. 32829

ARTICLE VIII EFFECTIVE DATE:Effective date, if other than the date of filing: 01/28/2020 (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.

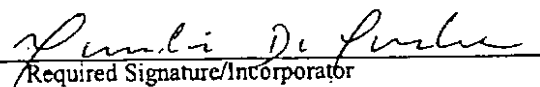
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

X 
Required Signature/Registered Agent

01/28/2020

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 
Required Signature/Incorporator

01/28/2020

Date