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## **COVER LETTER**

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

subject: <u>Reina Ventures</u> , (proposed corpora	Inc.	
(PROPOSED CORPORA	TE NAMÉ – <u>MUST INCL</u> I	<u>UDE SUFFIX</u> )
Enclosed are an original and one (1) copy of the arti	cles of incorporation and	l a check for:
\$70.00	☐ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
	ADDITIONAL CO	
FROM: Randall J. F. Name		
Holly wood, FL City. 5/2 - 521 - 233, Daytime To	•	
Daytime To Campbell (E-mail address: (to be used		Anotification)

NOTE: Please provide the original and one copy of the articles.

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

11	5, P	CIPAL OFFICE Principal street  AL Rd #  d, FL 330	address No	_ <del>_</del>		Mailing add	fress, if differences	ent is:
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r 0	<u>INITI</u>	RES f stock is: C AL OFFICERS A le: Santiage			<del></del>	الم م	FECRIDA.	2: 27
	ress	loaj s. Hollyw	Park R	+ #alo	Name and 1 th	loal s	, Pask	Rd #2/12 FL 3300
	e and Title	Sandra 1021 S. Hollyno	Stenor Park Re Od, FL	1, vp 1. #alo 33021	Name and Titl Address:			
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	e and Title	v						

Name and	Title:	Name and Title:	<del> </del>
Address		Address:	
ADTICLE 1/I D	ecisteden icent		
The name and Flo	EGISTERED AGENT rida street address (P.O. Box NOT accepta		
Name:	Santiago Reina		
Address:	102) S. Park Rd #2	lo_	
	Santiago Reina 102) S. Park Pd #2 Hollynacd, FL 330	21	
	,0		201 [AT
<u>ARTICLE VII   I.</u>	<u>NCORPORATOR</u>		TE TE
The <u>name and add</u>	Iress of the Incorporator is:		\$25 6 4
Name:	Santiago Reina	·	
Address:	1021 S. Park Rd	#alo	E: 5
	Santiago Reina 1021 S. Park Rd Hollywood, FL 3	3021	27 RIDA
ARTICLE VIII	<u> </u>		
Effective date, if o	ther than the date of filing:		
(if an effective da filing.)	te is listed, the date must be specific and	cannot be more than five day	ys prior or 90 days after the
Note: If the date i	nserted in this block does not meet the app	licable statutory filing requiren	nents, this date will not be listed;
the document's eff	ective date on the Department of State's re	cords.	
Having been home	d as registered agent to accept service of pro	ocess for the above stated corpo	ration at the place designated in t
certificate, I om fai	nilibe with and accept the appointment as r	registered agent and agree to ac	t in this capacity
-/p			02/06/2020
	Required Signature/Registered Age		Date
I submit this docu	ment and affirm that the facts stated here		
	enamment of State constitutes a third degree		(, (,)), F <sub>1</sub> ,3,
	eparlment of State constitutes a third degree	e jeiony us proviueu jor in s.617	0.155, F.S.