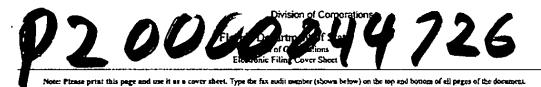
6/4/2020



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Oivision of Corporations Fax Number : (850)617-6581

: DUL HULEISENVICES COMP : E20200000044 : (786)537-3766 : (305)503-7123

FLORIDA PROFIT/NON PROFIT CORPORATION **ROLOTA WINES CORP**

Certificate of Status	0
Certified Copy	0
Page Court Estimated Charge	01
Estimated Charge	\$70,00

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Help



FLORIDA DEPARTMENT OF STATE
Division of Corporations

KML

SUBJECT: ROLOTA WINES CORP

REF: W20000060614

June 16, 2020

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The effective date is not acceptable since it is not within five working days of the date of receipt.

If you have any further questions concerning your document, please call (850) 245-6052.

Derrick Thompson Regulatory Specialist II New Filing Section FAX Aud. #: H20000168346 Letter Number: 220A00011830

H200001683463

COVER LETTER

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

SUBJECT:	ROLOTA WINES CORP		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and	d a check for:
■ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fcc & Certified Copy ADDITIONAL CO	S87.50 Filing Fee. Certified Copy & Certificate of Status DPV REQUIRED
FROM:	PEGGY CRUZ.	(Printed or typed)	
<u>-</u>	4711 SW 43RD TERR	Address	
with the second	FT LAUDERDALE City, State & Zip		
	305-851-1992 Daytime T	elephone number	
	tapia victor@aol.com E-mail address: (to be used		notification)

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

H200001683463

ARTICLES OF INCORPORATION

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

	<i>PAL OFFICE</i> rincipal <u>street</u> address	Maili	ng address, if different is:
711 SW 43rd Terrace	314		
ort Lauderdaie, Pt. 33	314	•	
<u></u> .			
TICLE III PURPO	SE e corporation is organized is:		
INE CONSULTING			

		· 	
	,		
TICLE IV SHARE	<u>S</u> Rock is:100		27 8
			
TICLE V INITIA	L OFFICERS AND/OR DIRECTORS		
Name and Title	PEGGY CRUZ	Name and Title:P	RESIDENT
	4711 SW 43RD, TERR		ž -
Audiesa	4711 SW 45RD LERK	Audiess.	(
	Fort Lauderdale, FL 33314		
Name and Title	VICTOR TAPIA AGUILAR	Name and Title:	VICE PRESIDENT
Address		Address:	
	Fort Lauderdale, FL 33314	_ ` ·	-, , , , , , , , , , , , , , , , , , ,
Name and Title:		Name and Title;	
Address		Address:	
Audress			
Madiess			
Audiess		.	

TUUUUI OUD 462

Name and 1	'itle:	Name and Title:
Address		Address:
	GISTERED AGENT ida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	KATHERINE CAICEDO	_
Address:	4167 NW 135TH ST	_
-	OPA LOCKA FL 33054	-
ARTICLE VII IN	CORPORATOR	
The name and add	ress of the Incorporator is:	
Name:	PEGGY CRUZ	-
Address:	4711 SW 43RD TERR	•
	Fort Lauderdale, FL 33314	-
ARTICLE VIII E	FFECTIVE DATE:	
Effective date, if ot (If an effective dat filing.)	her than the date of filing: 06/18/2020 e is listed, the date must be specific and canno	. (OPTIONAL) at be more than five days prior or 90 days after the
	serted in this block does not meet the applicable etive date on the Department of State's records.	statutory filing requirements, this date will not be listed as
Having been named certificate. I am fan	l as registered agent to accept service of process f niliar with and accept the appointment as egister	for the above stated corporation at the place designated in this red agent and agree to act in this capacity $06 / 18 / 2020$
 	Required Signature/Registered Agent	Jate.
	nent and affirm that the facts stated herein are partment of State constitutes a third degree felon	true. I am aware that the false information submitted in a y as provided for in s.817.155, F.S.
Required Signature	every Chuz	Date 06 / 18 / 2020

H 2000 16834