Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : ALEX PINA CO. Account Number : I20190000095 Phone : (305)803-8471 Fax Number : (305)602-3977

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ____client@alexpina.co

FLORIDA PROFIT/NON PROFIT CORPORATION

Fundacion Lara Deportiva Corp

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Electronic Filing Menu

Corporate Filing Menu

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ARTICLES OF INCORPORATION

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

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nil Muchacho - Director
Ste 100-101
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Name an	d Title:	Name and Title:	
Address		Address:	
ARTICLE VI	REGISTERED AGENT		
The name and F	lorida street address (P.O. Box NOT accept	able) of the registered agent is:	
Name:	Alex Pina Co.		
Address:	8400 NW 36th St Suite 450		
	Doral, FL 33166		
ARTICLE VII	<u>INCORPORATOR</u>		
The name and a	ddress of the Incorporator is:		
Name:	Eduardo A Villasmil		
Address:	7910 NW 25th St Ste 100-101		
	Doral, FL 33122		
ARTICLE VIII	EFFECTIVE DATE:		
(If an effective of	Other than the date of filing:	(OPTIONAL) I cannot be more than five days prior or 90 days after t	the
filing.)			
	e inserted in this block does not meet the ap effective date on the Department of State's r	olicable statutory filing requirements, this date will not be lecords.	listed as
		vocess for the above stated corporation at the place designat registered agent and agree to act in this capacity	ted in this
	Aix-	06/22/2020	
	Required Signature/Registered Ag	ent Date	
		ein are true. I am aware that the false information subm	itted in a
document to the	Department of State constitutes a third degr	ve felony as provided for in s.817.155, F.S.	
	Jan 19	06/22/2020	
Required Signati	ure/Incorporator	Date	