Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : DELANEY CORPORATE SERVICES

Account Number : I20140000112 Phone : (800)717-2810 Fax Number : (518)465-7883

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

FLORIDA PROFIT/NON PROFIT CORPORATION ANDEAN GOURMET FOODS & BEVERAGES INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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

ARTICLE I NAME The name of the corporati	on shall be: ANDEAN GOUR	MET FOODS & BEVERAGES INC.	
ARTICLE II PRINCI 14127 Jomatt Loop		Mailing addre	ss, if different is:
APPLACE THE DURBO	e corporation is organized is:	Any lawful act or activity for which	
ARTICLE V INITIA	tock is: 200 LOFFICERS AND/OR DIRECT		20
Address	14127 Jomatt Loop		<u> </u>
	Winter Garden, FL 34787		
Name and Title:		Name and Title:	
Address		Address:	
Name and Title:		Name and Title:	
Address			

Name and	Title: Name and Title:
Address	Address:
ARTICLE VI R	RGINTERED AGENT cide attract additions (P.O. Box NOT acceptable) of the registered agent is:
, tve hume and the	tion survey southers (F.O. Box 1901 acceptants) of die regulation again at
Name:	Agustin Peroz
Address:	14127 Jonnest Loop
	Winter Garden, FL 34787
ARTICLE VII II	<u>YCORPORATOR</u>
The parms and add	rest of the Incorporator is:
Name:	Agustin Perez
Address:	14127 Jomatt Loop
	Winter Garden, Fl. 34787
ARTICLE VIII	PPRCTIVE DATE: her than the date of filling:
(If an effective dated (iling.)	her than the date of filing:
Note: If the date in	serted in this block does not meet the applicable statutory filling requirements, this date will not be listed as ective date on the Department of State's records.
dis abcament s chi	the different of days a record.
Having been named	as registered again to accept service of process for the above stated corporation at the place designated in this allowith and accept the appointment as registered agent and agree to act in this capacity
& M	mat = 7/10/2020
//	Required Stantaure/Registered Agent Date
documents the De	nent-ent affirm that the facts stated herein are true. I am aware that the false information submitted in a patringly of State constitutes a third degree felony as provided for in 2.817.135, F.S.
4/11	Date 7 10 2020
Required Signature	inconsortion