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 : (305)803-8471 Phone 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.

		client@alexpina.co	
maıl	Address:_		

FLORIDA PROFIT/NON PROFIT CORPORATION

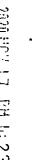
Distribuidora Shein S&A Corp

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ARTICLES OF INCORPORATION

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

ARTICLE 1 N The name of the co		Distribuidora Shein	S&A Corp		
ARTICIÆII F	PRINCIPAL OFFIC Principal stre arkway Unit 207			Mailing address, if different is:	
The Colony, TX 75	056				
ARTICLE III P	<u>URPOSE</u> thich the corporation	n is organized is:Any	and All Lawful Purpose	2020 2020	
	<u></u>				
			<u>, </u>		
				2 2 3	
		-			
ARTICLE V I	nes of stock is: NITIAL OFFICER. d Title: Maxel J Val	10,000 S. <u>AND/OR DIRECTORS</u> buena Mavarez - President von Parkway Unit 207	Name and Title: Address:	Maxio J Valbuena Mavarez - Vicepresiden 6805 Windhaven Parkway Unit 207	
	The Colony.	TX 75056	<u> </u>	The Colony, TX 75056	
Name and	l Title:		Name and Title	:	
Address			Address:		
Name and	1 Title:		Name and Title	:	
Address			Address:		

Name and Title:		Name and Title:		
Address		Address:	··	
ARTICLE VI R	<u>PEGISTERED AGENT</u>			
The name and Flo	orida street address (P.O. Box NOT acceptable)	of the registered agent is:		
Name:	Alex Pina Co.	_		
Address:	8400 NW 36th St Ste 450	<u> </u>		
	Doral, FL 33166	_		
ADTICLE LIL	NCORPORATOR			
	dress of the Incorporator is:			
riic <u>name and ad</u>	Maxel J Valbuena Mavarez - President			
Name:		_		
Address:	6805 Windhaven Parkway Unit 207	<u> </u>		
	The Colony, TX 75056	_		
ARTICLE VIII	EFFECTIVE DATE:			
Effective date, if	other than the date of filing:	(OPTIONAL)		
(If an effective da filing.)	ate is listed, the date must be specific and can	not be more than five days prior or 90	days after the	
Note: If the date	inserted in this block does not meet the applicab fective date on the Department of State's record	le statutory filing requirements, this date	e will not be listed as	
the document s cr	rective date of the Department of State 9 record	7.		
Having been num certificate, I am fo	ed as registered agent to accept service of process imiliar with and accept the appointment as regist	for the above stated corporation at the pereced agent and agree to act in this capac	lace designated in this rity	
	A Vide		11/17/2020	
	Required Signature Registered Agent		Date	
I submit this doc	ument and affirm that the facts stated herein a	re true. I am aware that the false infor	mation submitted in a	
document to the L	Department of State constitutes a third degree felo	ony as provided for in \$.817.155, F.S.		
	H. W.		11/17/2020	
Required Signatu	re/Incorporator	Date		