Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000423873 3)))



H200004238733ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone

: (305)552-5973

: (305)675-5944

Fax Number

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

Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION ASCOTAN USA INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

J. FASON

DEC 14 2020

Electronic Filing Menu Corporate Filing Menu

Help

.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

ASCOTAN USA INC

ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
PRINCIPAL ADDRESS: 2950 SW 27 AVENUE, STE 220, MIAMI, FL 3313
MAILING ADDRESS: 2950 SW 27 AVENUE, STE 220, MIAMI, FL 33133
ARTICLE III SHARES: The number of shares of stock is: 100 SHARES
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
ANIBAL MONTERO SAAVEDRA - PRESIDENT/DIRECTOR
2020
DEC
· -
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
CONSULTING SERVICES OF SOUTH FLORIDA INC
2121 PONCE DE LEON BLVD., STE 1050, CORAL GABLES, FL 33134
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
EILEEN GARCIA
2121 PONCE DE LEON BLVD., STE 1050, CORAL GABLES, FL 33134
ELECT SHAP OF FEATUREADY OF FUNDO, COLUMN CARRIED, U. 33 134

Required Signatures:

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Registered-Agent

12/07/2020

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Incorporator

12/07/2020

Date

2020 DEC 11 PM 12: 11