

1/21/2021

P21000003700

Division of Corporations

**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 : 120190000095
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.****

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FLORIDA PROFIT/NON PROFIT CORPORATION

Porcelana Corp

Certificate of Status	0
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Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Porcelana Corp**ARTICLE II PRINCIPAL OFFICE**Principal street address
5671 NW 112th Ave Apt 113

Mailing address, if different is:

Doral, FL 33178

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and All Lawful Purpose**ARTICLE IV SHARES**

The number of shares of stock is:

10,000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: **Isabella Coromoto Gualina Herrera - President**

Name and Title:

Address **5671 NW 112th Ave Apt 113**

Address:

Doral, FL 33178

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

2021 JAN 21 PM 4:36

5671 NW 112th Ave

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

_____**ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:Name: Alex Pina Co.Address: 8400 NW 36th St Ste 450Doral, FL 33166**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: Isabella Coromoto Guaina HerreraAddress: 5671 NW 112th Ave Apt 113Doral, FL 33178**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing. _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records*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*01/21/2021_____
Required Signature/Registered Agent_____
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.*01/21/2021_____
Required Signature/Incorporator_____
Date