

2/3/2021

P21000007864

Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
SILVERNET USA CORP

Certificate of Status	0
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2021 FEB -3 AM 10:47

SECRETARY OF STATE
TALLAHASSEE, FLARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)ARTICLE I NAMEThe name of the corporation shall be: SILVERNET USA CORPARTICLE II PRINCIPAL OFFICEPrincipal street address

Mailing address, if different is:

407 LINCOLN RD STE 11 HMIAMI BEACH, FL 33139ARTICLE III PURPOSEThe purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESSARTICLE IV SHARESThe number of shares of stock is: 100ARTICLE V INITIAL OFFICERS AND/OR DIRECTORSName and Title: Enrique Gonzalez De La Fuente (P) Name and Title: _____Address: 407 LINCOLN RD STE 11 H Address: _____MIAMI BEACH, FL 33139

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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: Enrique Gonzalez De La Fuente
Address: 407 LINCOLN RD STE 11 H
MIAMI BEACH FL 33139

ARTICLE VII. INCORPORATOR

The name and address of the incorporator is:

Name: Enrique Gonzalez De La Fuente
Address: 407 LINCOLN RD STE 11 H
MIAMI BEACH, FL 33139

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 (5) 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 to 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.

<u>[Signature]</u> Required Signature Registered Agent	_____ Date
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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 §817.155, F.S.

<u>[Signature]</u> Required Signature Incorporator	_____ Date
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TALLAHASSEE, FL