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Division of Corporations
Florida Department of State
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(((H21000127050 3)))



H210001270503ABCS

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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : L & R INTERNATIONAL FIRM INC
Account Number : I20200000026
Phone : (786)413-4344
Fax Number : (305)222-9004

****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
ANANDRIA INC.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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Handwritten signature and date 3-31

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: ANANDRIA INC

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: MALENA PEREZ BALUJA

Name (Printed or typed)

15631 SW 109TH TERRACE

Address

MIAMI, FL 33196

City, State & Zip

786-290-1174

Daytime Telephone number

MPB5180@YAHOO.COM

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

2021 MAR 30 PM 2:06

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: ANANDRIA INC**ARTICLE II PRINCIPAL OFFICE**Principal street address15631 SW 109TH TERRACEMIAMI, FL 33196

Mailing address, if different is:

15631 SW 109TH TERRACEMIAMI, FL 33196**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: MALENA PEREZ BALUJA / PRESIDENTAddress: 15631 SW 109TH TERRACEMIAMI, FL 33196Name and Title: LUCIA SANSONE / VICEPRESIDENTAddress: 15631 SW 109TH TERRACEMIAMI, FL 33196

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: OSCAR LOPEZ
Address: 8410 WEST FLAGLER ST, STE 205
MIAMI, FL 33144

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: OSCAR LOPEZ
Address: 8410 WEST FLAGLER ST, STE 205
MIAMI, FL 33196

ARTICLE VIII EFFECTIVE DATE:Effective date, if other than the date of filing: 03/30/2021 (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

Oscar Lopez 03/30/2021
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.

Palma Perez Baluy 03/30/2021
Required Signature/Incorporator Date