

P21000038858

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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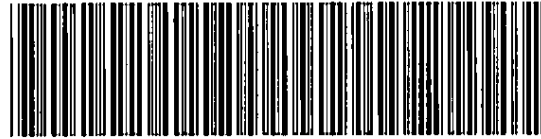
(Business Entity Name)

(Document Number)

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**CORPORATE  
ACCESS,  
INC.**

*When you need ACCESS to the world*

236 East 6th Avenue, Tallahassee, Florida 32303  
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

**WALK IN**

**PICK UP:** 4/30 Glinda

☐ **CERTIFIED COPY**

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ARTICLES

1. **ULTRA PHARMA, CORP.**

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

**SPECIAL  
INSTRUCTIONS:**

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## COVER LETTER

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

**SUBJECT:** ULTRA PHARMA, Corp.

(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:** VIA Lawyers, c/o Alejandro I. Velez, Esq.

Name (Printed or typed)

14 NE 1st Avenue, Suite 815

Address

Miami, Florida 33132

City, State & Zip

305-425-1565

Daytime Telephone number

office@vialawyers.com

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

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

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TALLAHASSEE FL 32314

**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: ULTRA PHARMA, Corp.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

14 NE 1st Avenue, Suite 815

Miami, Florida 33132

**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: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Juan David Gracia, President

Name and Title: \_\_\_\_\_

Address 14 NE 1st Avenue, Suite 815

Address: \_\_\_\_\_

Miami, Florida 33132

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

2021 APR 30 PM 10:15  
ULTRA PHARMA, CORP.

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: VIA Lawyers, c/o Alejandro I. Velez, Esq.  
Address: 14 NE 1st Avenue, Suite 815  
Miami, Florida 33132

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Alejandro I. Velez, Esq.  
Address: 14 NE 1st Avenue, Suite 815  
Miami, Florida 33132

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 4/30/2021 (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*



\_\_\_\_\_  
Required Signature/Registered Agent

4/30/2021

\_\_\_\_\_  
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.*



\_\_\_\_\_  
Required Signature/Incorporator

4/30/2021

\_\_\_\_\_  
Date

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