lorida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

The state of the s

Fax Number : (850)617-6381

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL ING

Account Number : 110432003053 Phone : (561)694-8107

Fax Number : (561)214-8442

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

resi1	Addmocco			
Lmail	Address:			

FLORIDA PROFIT/NON PROFIT CORPORATION Proactinmo US Corp.

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$87.50

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:	Proactinmo US C	Corp.		
ARTICLE II PRINCIPAL OFFIC Principal stre Calle Santa Sabina 8, 2da P 28007 Madrid, Spain	eet address Planta		Mailing address, if different is	:
ARTICLE III PURPOSE The purpose for which the corporation permitted under the laws of the				nctivity
(b) To generally have and exer		and privileges ne	cessary and incident to	carrying out
properly the objects herein me	entioned.			
(c) To do anything and everyth	ning necessary, suitable	e, convenient or p	proper for the accomplis	hment of any
of the purposes or the attain	nment of any or all of	the objects here	einbefore enumerated	or incidental
to the purposes and powers expedient.	of the corporation or	which at any ti	me appear conductive	thereto or
ARTICLE V INITIAL OFFICER Name and Title:			TALLAHASS E.	71 KAY 1 L AH 2:
				2: 52
Name and Title:		Name and Title:	·	
Address		Address:		
Name and Title:	······································	Name and Title:	, 	
Address	· · · · · · · · · · · · · · · · · · ·	Address:		
				

Required Signature/Incorporator

Name and	Title: Na	lame and Title:
Address	A	address:
	EGISTERED AGENT ida street address (P.O. Box NOT acceptable) of the	registered agent is:
Name:	Corporate Creations Network Inc.	
Address:	801 US Highway 1	
	North Palm Beach, FL 33408	21 TAL
		21 MAY 14 SECRETARY ALLAHASSE
ARTICLE VII 11	<u>YCORPORATOR</u>	ASS.
The name and add	ress of the Incorporator is:	
Name:	Ines Egido	
Address:	Calle Santa Sabina 8, 2da Planta	2: 52
	28007 Madrid, Spain	
Effective date, if of (If an effective da filing.) Note: If the date in	her than the date of filing: te is listed, the date must be specific and cannot be a secreted in this block does not meet the applicable state entire date on the Department of State's records.	. (OPTIONAL) e more than five days prior or 90 days after the stutory filing requirements, this date will not be listed as
Having been name certificate, I am fai	d as registered agent to accept service of process for th niliar with and accept the appointment as registered a	he above stated corporation at the place designated in th agent and agree to act in this capacity
/s/ Caitlin Laza	rus Caitlin Lazarus, Special Se	ecretary 05/14/2021
	Required Signature/Registered Agent	Date
	nent and affirm that the facts stated herein are true partment of State constitutes a third degree felony as	te. I am aware that the false information submitted in sprovided for in s.817.155, F.S.
Required Signate	In Gyl	May 14, 2021 Date

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