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

From:
Account Name : LUPA ENTERPRISES INC
Account Number : I20200000050
Phone : (727)298-8007
Fax Number : (727)914-5090

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

Email Address: info@usacorporationservices.com

FLORIDA PROFIT/NON PROFIT CORPORATION

ISSA GROUP INC

Certificate of Status	0
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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: ISSA GROUP INC

ARTICLE II PRINCIPAL OFFICE

Principal street address
600 CLEVELAND ST STE 393 OFF 343
Clearwater, Florida 33755

Mailing address, if different is:

SAME OF PRINCIPAL

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: SERVICES INTEGRAL

ARTICLE IV SHARES

The number of shares of stock is: 1500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: BERNARDA DEL CARMEN MOYA VILCHES

Address: CAMINO EL ARRAYAN S/N, COMUNA DE
MOSTAZAL, RANCAGUA, CACHAPOAL,
CHILE

Name and Title: ALEXIS SAN JEAN NAVARRETE FEMENIAS

Address: CAMINO EL ARRAYAN S/N, COMUNA DE
MOSTAZAL, RANCAGUA, CACHAPOAL,
CHILE

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 AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Lupa Enterprises Inc. Luciana Mordini
Address: 600 CLEVELAND ST STE 393
CLEARWATER, FL 33755

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Luciana Mordini
Address: 1020 Pine Brook DR
CLEARWATER, FL 33755

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

Lupa Enterprises Inc. Luciana Mordini
Required Signature: Registered Agent

JUN 07, 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.

Luciana Mordini
Required Signature: Incorporator

JUN 07, 2021
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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