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6/25/20

Division of Corporations

P210000060045

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

From: Account Name : ALEX PINA CO.
Account Number : I20190000895
Phone : (305)803-8471
Fax Number : (305)602-3977

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

Email Address: client@alexpina.co

FLORIDA PROFIT/NON PROFIT CORPORATION
Protec Condoms Corp

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

21 JUN 25 PM 10:07

2021 JUN 25 PM 2:52

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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: Protec Condoms Corp

ARTICLE II PRINCIPAL OFFICE

10293 SW 77th Ct Principal street address Mailing address, if different is:

Miami, FL 33156

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: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Oscar G Bello - President</u>	Name and Title:	<u>Ricardo A Ortega Oliver - Vicepresident</u>
Address	<u>5432 NW 112th Ct</u>	Address:	<u>3650 Gardenside Ct</u>
	<u>Doral, FL 33178</u>		<u>Alpharetta, GA 30004</u>

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: Alex Pina Co
 Address: 8400 NW 36th St Ste 450
Doral, FL 33166

ARTICLE VII INCORPORATOR

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

Name: Oscar G Bello
 Address: 5432 NW 112th Ct
Doral, FL 33178

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



 Required Signature/Registered Agent 06/21/2021
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 06/21/2021
Date