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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 : SALOMON B. ESQUENAZI, P.A.
Account Number : I20130000020
Phone : (954)989-4995
Fax Number : (954)989-4991

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

Email Address: corporate@esquenazi-law.com

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**DOMESTICATION
SOLEMAR HOLDINGS CORPORATION**

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$137.50

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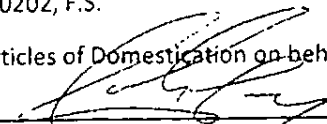
Articles of Domestication
Foreign Corporation Domesticating to Florida

The undersigned, CARLOS LEVY DIRECTOR
(Name) (Title)

of SOLEMAR CORPORATION, a foreign
corporation, in accordance with s. 607.11922, Florida Statutes, submit these Articles of
Domestication.

1. Then name of the domesticating corporation is SOLEMAR CORPORATION
(Foreign Corporation)
2. The jurisdiction and date of its formation is REPUBLIC OF LIBERIA, APRIL 26, 1979
3. The name of the domesticated corporation is SOLEMAR HOLDINGS CORPORATION
4. The jurisdiction of formation of the domesticated corporation is Florida
5. The domestication corporation is a foreign corporation and the domestication was
approved in accordance with its organic law.
6. Attached are Florida Articles of Incorporation to complete the domestication
requirements pursuant to s.607.0202, F.S.

I certify I am authorized to sign these Articles of Domestication on behalf of the corporation.


(Authorized Signature)

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ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

SOLEMAR HOLDINGS CORPORATION

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

Principal Address

21050 NE 38 Avenue, #2402

Aventura, FL 33180

Mailing Address

21050 NE 38 Avenue, #2402

Aventura, FL 33180

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ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

This corporation is formed for the purpose of engaging in any activity or business permitted under the laws
of the United States and the State of Florida

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 500 AT NO PAR VALUE

ARTICLE VI REGISTERED AGENT AND STREET ADDRESS

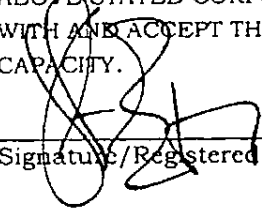
THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX **NOT** ACCEPTABLE) OF THE REGISTERED AGENT IS:

CORPORATE SOLUTIONS OF SOUTH FLORIDA, INC

4651 SHERIDAN STREET, SUITE 355

HOLLYWOOD, FL 33021

HAVING BEEN NAMED AS REGISTERED AGENT AND 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.



Signature/Registered Agent

8/16/2021
Date

ARTICLE V DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Name & Title: Carlos Levy, Director
Address: 21050 NE 38 Avenue, #2402
Aventura, FL 33180

Name & Title: Miriam Camhi de Levy, Director
Address: 21050 NE 38 Avenue, #2402
Aventura, FL 33180

Name & Title: _____
Address: _____

Name & Title: _____
Address: _____

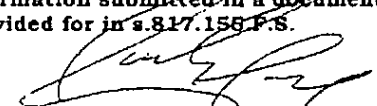
Name & Title: Rafael Levy, Director
Address: 21050 NE 38 Avenue, #2402
Aventura, FL 33180

Name & Title: _____
Address: _____

Name & Title: _____
Address: _____

Name & Title: _____
Address: _____

I submit this document and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.158 F.S.



Signature/Authorized Person

8/16/2021

Date