

9/13/21, 2:17

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Division of Corporations
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 : I20190000095
Phone : (305)803-8471
Fax Number : (305)602-3977

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2021 SEP 13 PM 3:21

Florida Division of Corporations

FLORIDA PROFIT/NON PROFIT CORPORATION

Kuality Corporation

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

Electronic Filing Menu

Corporate Filing Menu

Help

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: Kuality Corporation

ARTICLE II PRINCIPAL OFFICE

Principal street address
1818 SW 1st Ave Apt 1011

Mailing address, if different is:

Miami, FL 33129

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any And All Lawful Purposes

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Rul A De Castro - President Name and Title: _____

Address: 1818 SW 1st Ave Apt 1011 Address: _____

Miami, FL 33129

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: CorpoNow LLC
 Address: 8400 NW 36th St Ste 450
Doral, FL 33166

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Rul A De Castro
 Address: 1818 SW 1st Ave Apt 1011
Miami, FL 33129

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 the certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

09/13/2021

Required Signature/Registered Agent

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in this document to the Department of State constitutes a third degree felony as provided for in § 817.155, F.S.

09/13/2021

Required Signature/Incorporator

Date