

# P21000083796

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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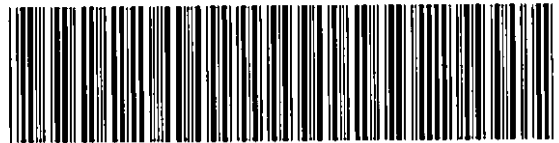
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FL  
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## COVER LETTER

Department of State  
New Filing Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

River and Sea Solutions Corp  
**SUBJECT:** \_\_\_\_\_  
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

Luis E. Fernandez, Esq  
**FROM:** \_\_\_\_\_  
Name (Printed or typed)

14411 S. Dixie Hwy, Suite 220  
\_\_\_\_\_  
Address

Miami, FL 33176  
\_\_\_\_\_  
City, State & Zip

305 239 9427  
\_\_\_\_\_  
Daytime Telephone number

paralegal@lef-law.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

**NOTE:** Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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ARTICLE I NAME

The name of the corporation shall be: River and Sea Solutions Corp

SECRETARY OF STATE  
TALLAHASSEE, FL

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

14411 S. Dixie Hwy., Suite 228

same as principal street address

Miami, FL 33176

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any lawful business purpose

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Maria Cristina Sanchez Lopez, President

Name and Title:

Address 14411 S. Dixie Hwy., Suite 228

Address:

Miami, FL 33176

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: SENTINEL CORPORATE SERVICES LLC  
Address: 14411 S. Dixie Hwy., Suite 220  
Miami, FL 33176

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Maria Cristina Sanchez Lopez  
Address: 14411 S. Dixie Hwy., Suite 228  
Miami, FL 33176

**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*

Luis E. Fernandez, Esq. 9/10/2021  
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 a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

Luis E. Fernandez, Esq. 9/10/2021  
Required Signature/Incorporator Date

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