## P21000087386

(Re	equestor's Name)			
(Ac	ldress)			
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(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT WAIT	MAIL		
(Bu	isiness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer			
		:		

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE: 084231 8020289
AUTHORIZATION :
COST LIMIT: \$70.00
ORDER DATE : October 6, 2021
ORDER TIME : 3:50 PM
ORDER NO. : 084231-005
CUSTOMER NO: 8020289
DOMESTIC FILING
NAME: HARDWARE BUSINESS INTERNATIONAL CORP
EFFECTIVE DATE:
XX ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Eyliena Baker - EXT.
EXAMINER'S INITIALS:

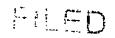
## **COVER LETTER**

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

SUBJECT: Ha	ardware Business International Corp				
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an	original and one (1) copy of the art	icles of incorporation and	l a check for:		
□ \$70.0 Filing F	00 □ \$78.75 fee Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	& Certificate of Status		
FROM		(0.11)			
	Name (Printed or typed)				
	175 SW 7TH STREET, SUITE 1712				
	Address				
	MIAMI, FLORIDA 33130				
	City. State & Zip				
	7865988007				
	Daytime 1	elephone number			
	marta.garcia@rclawllp.net				

E-mail address: (to be used for future annual report notification)

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



name of the corpo	Hardware Business Interna	itional Corp	2021 OCT -7 PM 12
TICLE II PRI	NCIPAL OFFICE Principal street address EET, SUITE 1712		SECRETALLY OF ST
AMI, FLORIDA 3			
FICLE III PUR purpose for whic	POSE h the corporation is organized is:		
	VFUL BUSINESS UNDER THE LAWS O		
		·	
		<del></del>	
<del></del>			
<u> </u>			
	IAL OFFICERS AND/OR DIRECTORS Also Nicolás Jelincic Troncoso - CFO/D	Name and Title	Sergio Jelincic Troncoso - CEO/D
Address	175 SW 7TH STREET, SUITE 1712	Address:	175 SW 7TH STREET, SUITE 1712
	MIAMI, FLORIDA 33130		MIAMI, FŁORIDA 33130
		_	<del></del>
Name and Titl	e:	_ Name and Title:	;
Address	175 SW 7TH STREET, SUITE 1712	_ Address:	
	MIAMI, FLORIDA 33130	_	
		_	
Name and Titl	e:	_ Name and Title:	<u> </u>
Address		_ Address:	

Name	and Title:	Name and Title:	
Addre	ess	Address:	
ARTICLE VI	REGISTERED AGENT		
Name:	Florida street address (P.O. Box NOT acceptable) of Corporation Service Company	of the registered agent is:	
Address:	1201 Hays Street	 '0	N. 3
	Tallahassee, FL 32301	-   	) 171 O
<u>ARTICLE VII</u>	INCORPORATOR	GORGIANY OF STATE	121 OCT -7 PM 12: 40
The name and	address of the Incorporator is:	<u> </u>	₽ <b>#</b> !2
Name:	MARTA GARCIA		2
Address:	175 SW 7TH STREET, SUITE 1712	in d	÷
	MIAMI, FLORIDA 33130		
Effective date. (If an effective filing.)	date is listed, the date must be specific and cann	. (OPTIONAL) ot be more than five days prior or 90 days after the	
Note: If the da the document's	te inserted in this block does not meet the applicable effective date on the Department of State's records	e statutory filing requirements, this date will not be liste	ed as
Having been na certificate, I am	imed as registered agent to accept service of process j familiar with and accept the appointment as registe EMELIVA BAW	for the above stated corporation at the place designated a red agent and agree to act in this capacity	in this
_	Assistant Vice President	10/07/2021	
	Required Signature/Registered Agent	Date	
I submit this do document to the	ocument and affirm that the facts stated herein are Department of State constitutes a third degree felor	true. I am aware that the false information submitted y as provided for in s.817.155, F.S.	d in a
	11 haries	10/06/2021	
Required Signat	ture/Incorporator	Date	