

1/3/22, 10:33 AM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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FLORIDA PROFIT/NON PROFIT CORPORATION
AMALFI CONSULTING CORPORATION

Certificate of Status	0
Certified Copy	1
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Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: AMALFI CONSULTING CORPORATION**ARTICLE II PRINCIPAL OFFICE**Principal street address
443 N.E. 75 STREET
MIAMI, FL 33138Mailing address, if different is:

_____**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY LAWFUL BUSINESS IN THE STATE OF FLORIDA

_____**ARTICLE IV SHARES**The number of shares of stock is: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: RODRIGO PINTOS - PRESIDENT

Name and Title: _____

Address 443 N.E. 75 STREET
MIAMI, FL 33138Address: _____

_____Name and Title: SERGIO PINTOS - SECRETARY

Name and Title: _____

Address 443 N.E. 75 STREET
MIAMI, FL 33138Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

_____2022 JAN -14 PM 7:15
STANDARD TIME
FALMOUTH, FL
F-100

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:Name: EDWARD JORDANAddress: 255 ALHAMBRA CIRCLE STE 500CORAL GABLES, FL 33134**ARTICLE VII INCORPORATOR**The **name and address** of the Incorporator is:Name: RODRIGO PINTOSAddress: 443 N.E. 75 STREETMIAMI, FL 33138**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_____
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_____
DateSECRET
TALLMADGE STATE

2022 JAN -4 PM 7:15

FEB -4