

P22000004428

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : E & F LATIN GROUP LLC
Account Number : I20160000049
Phone : (954)384-8565
Fax Number : (954)385-5175

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

Email Address: Office@eflatinaccounting.com

**FLORIDA PROFIT/NON PROFIT CORPORATION
JPG XIAN INTERNATIONAL CORP**

Certificate of Status	1
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Corporate Filing Menu

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CLERK OF STATE
TALLAHASSEE, FLORIDA

[Handwritten signature]

COVER LETTER

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

SUBJECT: JPG XIAN INTERNATIONAL CORP

(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 ☒ \$78.75
Filing Fee Filing Fee
& Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32314

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FROM: E&F LATIN GROUP LLC

Name (Printed or typed)

1820 N CORPORATE LAKES BLVD SUITE 109

Address

WESTON, FL 33326

City, State & Zip

954 384 8565

Daytime Telephone number

DIEGO@EFLATINACCOUNTING.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)

ARTICLE I NAMEThe name of the corporation shall be: JPG XIAN INTERNATIONAL CORP**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address
22 SALAMANCA AVE UNIT 306CORAL GABLES FL 33134Mailing address, if different is:
22 SALAMANCA AVE UNIT 306CORAL GABLES FL 33134**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: All Lawfull Purposes**ARTICLE IV SHARES**The number of shares of stock is: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: JAIME PERAFAN - PAddress: 22 SALAMANCA AVE UNIT 306CORAL GABLES FL 33134Name and Title: CATALINA PAREFFAN - VPAddress: 22 SALAMANCA AVE UNIT 306CORAL GABLES FL 33134

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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2022 JAN 24 AM 10:19

SECRETARY OF STATE

TALLAHASSEE, FL 32310

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: E&F LATIN GROUP LLC
 Address: 1820 N CORPORATE LAKES BLVD
SUITE 109, WESTON, FL 33326

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: DIEGO FIGUEROA
 Address: 1820 N CORPORATE LAKES BLVD
SUITE 109, WESTON, FL 33326

ARTICLE VIII EFFECTIVE DATE:Effective date, if other than the date of filing: 01/21/2022 (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 on 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*

Diego Figueroa _____ 01/21/2022
 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.

Diego Figueroa _____ 01/21/2022
 Required Signature/Incorporator Date

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA