

4/15/22, 10:44 AM

P22000029216

Division of Corporations  
 Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000137327 3)))



H220001373273ABC.

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.**  
 Doing so will generate another cover sheet.

To:

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

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.  
 Account Number : I20000000146  
 Phone : (305)444-4994  
 Fax Number : (305)328-4774

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

Email Address: \_\_\_\_\_

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

2022 APR 15 AM 12:52

FILED

**FLORIDA PROFIT/NON PROFIT CORPORATION  
 UNION COMMERCIAL CORP**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

RECEIVED

2022 APR 15 PM 12:32

FLORIDA DEPARTMENT OF STATE  
 DIVISION OF CORPORATIONS  
 COMMERCIAL SERVICES

HL

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: UNION COMMERCIAL CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address201 Biscayne BoulevardSuite 1410Miami, Florida 33131

Mailing address, if different is:

201 Biscayne BoulevardSuite 1410Miami, Florida 33131**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: Any and all lawful business**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Anabella S. Viyella, DirectorAddress 201 Biscayne BoulevardSuite 1410Miami, Florida 33131

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

FILED  
2022 APR 15 AM 12:52  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

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: World Coporate Services, Inc.  
Address: 2665 South Bayshore Drive, Suite 703  
Miami, Florida 33133

**ARTICLE VII INCORPORATOR**The **name and address** of the Incorporator is:

Name: Anubella S. Vivella  
Address: 201 Biscayne Boulevard, Suite 1410  
Miami, Florida 33131

FILED  
2022 APR 15 AM 12:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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

4/13/2022  
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 §817.155, F.S.*

\_\_\_\_\_  
Required Signature/Incorporator

4-13-2022  
Date