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**FLORIDA PROFIT/NON PROFIT CORPORATION
INVERTMAX INTERNATIONAL CORP**

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

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

ARTICLE I NAMEThe name of the corporation shall be: INVERTMAX INTERNATIONAL CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

4995 NW 72ND AVE STE 205MIAMI, FL 33166**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: RAYMUNDO ALBERTO FUENMAYOR PEROZO(P)

Name and Title: _____

Address 4995 NW 72ND AVE

Address: _____

STE 205MIAMI, FL 33166Name and Title: BERENICE SOTELO GODOY (VP)

Name and Title: _____

Address 4995 NW 72ND AVE

Address: _____

STE 205MIAMI, FL 33166

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

2022-03-22 11:12:38

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: BERENICE SOTELO GODOY
Address: 4995 NW 72ND AVE STE 205
MIAMI, FL 33166

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: BERENICE SOTELO GODOY
Address: 4995 NW 72ND AVE STE 205
MIAMI, FL 33166

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

/s/ Berenice Sotelo Godoy 04/22/2022
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.

/s/ Berenice Sotelo Godoy 04/22/2022
Required Signature/Incorporator Date

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