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Florida Department of State
Division of Corporations
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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
COMMERCIAL SERVICES

FLORIDA PROFIT/NON PROFIT CORPORATION CINTRA ELECTRIC CORP

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

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28

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: CINTRA ELECTRIC CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address
17943 SW 146 CT
MIAMI, FL 33177Mailing address, if different is:
17943 SW 146 CT
MIAMI, FL 33177**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: SHARES: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: CARLOS CINTRA - P

Name and Title: _____

Address: 17943 SW 146 CT

Address: _____

MIAMI, FL 33177Name and Title: JONNATHAN CINTRA - VP

Name and Title: _____

Address: 17943 SW 146 CT

Address: _____

MIAMI, FL 33177

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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VALUATION

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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: CARLOS CINTRA
Address: 17943 SW 146 CT
MIAMI, FL 33177

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: CARLOS CINTRA
Address: 17943 SW 146 CT
MIAMI, FL 33177

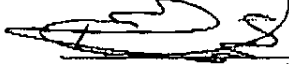
ARTICLE VIII EFFECTIVE DATE:

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

4/14/2022
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 s.817.135, F.S.



Required Signature/Incorporator

4/14/2022
Date

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TALLAHASSEE