2000051575

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



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CÁPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

La Primordial Corp.				
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	·· ···· ··-			
				A Cl
				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
				Art, of Amend, File
				RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
				Cert. Copy
				Photo Copy
				Certificate of Good Standing
				Certificate of Status
			<u></u>	Certificate of Fictitious Name
			 	Corp Record Search
			<u> </u>	Officer Search
				Fictitious Search
Signature			<u> </u>	Fictitious Owner Search
0.6				Vehicle Search
				Driving Record
Requested by: SETH	06/22/22			UCC 1 or 3 File
	06/22/22 Data	Time		UCC 11 Search
Name	Date	Time		UCC 11 Retrieval
Walk-In	Will Pick Up			Courier

COVER LETTER

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

SUBJECT: La Primordial Corp.					
(PROPOSED CORPORA	TE NAME - <u>MUST INCLUDE SUFFIX</u>)				
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:				
\$70.00 S78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status				
	ADDITIONAL COPY REQUIRED				
FROM: Bared & Associates, P.A.	(Printed or typed)				
201 Alhambra Circle, Suite 501					
Coral Gables, FL 33134					
305-666-6010 Daytime To	elephone number				
mimi@baredlaw.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 The name of the cor	NAME La Primordial Corp.		
ARTICLE II	PRINCIPAL OFFICE		
_	Principal street address	Mailing a	ddress, if different is:
	01 Alhambra Circle, Suite 501		<u> </u>
,C	oral_Gables,_FL_33134	***	
ARTICLE III	PURPOSE		
	nich the corporation is organized is:)22 TA
	wful business.		
			2022 JUN 23 SLABLIAHA
			23
			FILED 22 JUN 23 PH 3: 0
ARTICLE IV			့် ယှ 🖵
The number of share	es of stock is:120		07
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTOR	S	
	lc:Jose Green, President & Director	Name and Title:	
Address:	201 Alhambra Circle, Suite 501		
	Coral Gables, FL 33134	<u> </u>	
Name and Tit	lc: Isaac Yedid, Secretary & Director	Name and Title:	
Address:	201 Alhambra Circle, Suite 501	Address:	
	Coral Gables, FL 33134		
			
Name and Tit	lc: Moises Levy, Treasurer & Director	Name and Title:	
Address:	201 Alhambra Circle, Suite 501		
	Coral Gables, FL 33134		
			
	<u>REGISTERED AGENT</u>		
	rida street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name: Address:	Pablo R. Bared, Esq.	-	
Addiess.	201 Alhambra Circle, Suite 501 Coral Gables, FL 33134	,	
	·	•	
	INCORPORATOR		
Name:	ress of the Incorporator is: Pablo R. Bared, Esq.		
Address:	201 Alhambra Circle, Suite 501.	-	
	Coral Gables, FL 33134	•	
	d as registered agent to accept service of process I familiar with and accept the appointment as regi		
			06/21/2022
	Required Signature/Registered Agent		Date
I submit this docur	nent and affirm that the facts stated herein are partment of State constitutes a third degree felony		false information submitted in a
			0.010 1 10.000
	Based Required Signature/Incorporator		06/21/2022 Date
	required arguature/incorporator		Date