

4-Jul-2022 09:47

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : RIVEROS CORP.
Account Number : I20190000048
Phone : (305)507-8464
Fax Number : (239)228-2074

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION

KUPARU INC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

RECEIVED
2022 JUL -5 AM 8:44
DIVISION OF CORPORATIONS
COMMERCIAL SERVICES

2022 JUL -5 PM 4:31

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COVER LETTER

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

SUBJECT: KUPARU INC
(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
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: MARIO A RIVEROS
Name (Printed or typed)

710 CUMBERLAND TERRACE
Address

DAVIE FL 33325
City, State & Zip

305 507 8464
Daytime Telephone number

ceo@riveroscorp.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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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: KUPARU INCARTICLE II PRINCIPAL OFFICEPrincipal street address

Mailing address, if different is:

710 CUMBERLAND TERRACE
DAVIE FL 33325175 SW 7TH ST SUITE 1906
MIAMI FL 33130ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ANY AND ALL LAWFUL BUSINESS ACTIVITYARTICLE IV SHARESThe number of shares of stock is: 100ARTICLE V INITIAL OFFICERS AND/OR DIRECTORSName and Title: RIVEROS, MARIO PRESAddress: 175 SW 7ST SUITE 1906
MIAMI FL 33130Name and Title: LAZCARRO, LISSETH SECAddress: 175 SW 7ST SUITE 1906
MIAMI FL 33130

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

2022 Jul 4:31 PM

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: BCS BRICKELL CORPORATE SERVICES INC
Address: 175 SW 7TH ST SUITE 1905
MIAMI FL 33130

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MARIO RIVEROS
Address: 175 SW 7ST SUITE 1906
MIAMI FL 33130

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
06/28/2022
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.817.155, F.S.

Mano T.
Required Signature/Incorporator
06/28/2022
Date

2022
-5
PM