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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 : ALEX PINA CO.  
Account Number : 120190000095  
Phone : (305)803-8471  
Fax Number : (305)602-3977

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

Email Address: client@alexpina.co

FLORIDA PROFIT/NON PROFIT CORPORATION  
TUNA SEAFOOD INC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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: TUNA SEAFOOD INC

ARTICLE II PRINCIPAL OFFICE  
Principal street address Mailing address, if different is:  
6045 NW 104TH PATH  
MEDLEY, FL 33178

ARTICLE III PURPOSE  
The purpose for which the corporation is organized is: ANY AND ALL LAWFUL PURPOSES

ARTICLE IV SHARES  
The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS  
Name and Title: ANDREINA D CORTESIA BALDAN - PRESIDENT Name and Title:  
Address: 6045 NW 104TH PATH Address:  
MEDLEY, FL 33178  
Name and Title: Name and Title:  
Address: Address:  
Name and Title: Name and Title:  
Address: Address:


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: ALEX PINA COAddress: 8400 NW 36TH ST STE 450DORAL, FL 33166**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: ANDREINA D CORTESIA BALDANAddress: 6045 NW 104TH PATHMEDLEY, FL 33178**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 Agent07/28/2022\_\_\_\_\_  
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.*\_\_\_\_\_  
Required Signature/Incorporator07/28/2022\_\_\_\_\_  
Date

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