8/23/22, 3:56 PM

## Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : E & F LATIN GROUP LLC

Account Number : I20160000049 Phone : (954)384-8565

Fax Number : (954)385-5175

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

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Ctild TT	WOOLESS:		

## FLORIDA PROFIT/NON PROFIT CORPORATION **OEGAMERICA CORP**

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## **COVER LETTER**

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

BJECT: OEGAN	(PROPOSED CORPOR	ATE NAME – MUST INCL	UDE SUFFIX)
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nosed are all one	mat and one (1) copy of the at	neies of meorporation and	Ta check for.
\$70.00	<b>\$78.75</b>	□ \$78.75	<b>□ \$</b> 87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
J	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of
		ADDITIONAL CO	Status OPY REQUIRED
182	Nam O N CORPORATE LAKES BLVD	e (Printed or typed) SUITE 109	
		Address	<del> </del>
WE	STON, FL 33326		
	Čity	, State & Zip	
954	384 8565		
	Daytime *	Telephone number	
DIE	GO@EFLATINACCOUNTING.C	ОМ	
	E-mail address: (to be use	ed 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)

e name of the corpor	ICIDAL OFFICE		
RTICLE II PRINCIPAL OFFICE Principal street address 120 N CORPORATE LAKES BLVD SUITE 109		1820 N C	Mailing address, if different is: ORPORATE LAKES BLVD
		SUITE 1	09
ESTON, FL 33331		WESTON, FL 33331	
TICLE III PURI e purpose for which	POSE the corporation is organized is: All Lawfull	Purposes	
			25 05 5
			- <u>A</u>
TICLE IV SHA	RES of stock is:		ċ
e number of shares of	of stock is: 1000  IAL OFFICERS AND/OR DIRECTORS	Name and Title	- + 00
e number of shares of	of stock is: 1000  IAL OFFICERS AND/OR DIRECTORS	Name and Title	JAIME I. MANSILLA PEREZ - D
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e number of shares of strates of strategies of str	IAL OFFICERS AND/OR DIRECTORS  Ide: CLAUDIO A. ARAVENA M -D  1820 N CORPORATE LAKES BLVD  SUITE 109  WESTON, FL 33326	Address: 	1820 N CORPORATE LAKES BLV SUITE 109 WESTON, FL 33326
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e number of shares of stricke V INIT.  Name and Tir  Address  Name and Tit	IAL OFFICERS AND/OR DIRECTORS  Itle: CLAUDIO A. ARAVENA M -D  1820 N CORPORATE LAKES BLVD  SUITE 109  WESTON, FL 33326	Address: Name and Title Address:	JAIME I. MANSILLA PEREZ - D  1820 N CORPORATE LAKES BLV  SUITE 109  WESTON, FL 33326
Name and Tit  Address  Name and Tit  Address	IAL OFFICERS AND/OR DIRECTORS  Ide: CLAUDIO A. ARAVENA M -D  1820 N CORPORATE LAKES BLVD  SUITE 109  WESTON, FL 33326	Address: Name and Title Address:	JAIME I. MANSILLA PEREZ - D 1820 N CORPORATE LAKES BLV SUITE 109 WESTON, FL 33326
Name and Tit  Address  Name and Tit  Address	IAL OFFICERS AND/OR DIRECTORS  Ide: CLAUDIO A. ARAVENA M -D  1820 N CORPORATE LAKES BLVD  SUITE 109  WESTON, FL 33326	Address: Name and Title Address: Nume and Title	JAIME I. MANSILLA PEREZ - D 1820 N CORPORATE LAKES BLV SUITE 109 WESTON, FL 33326

Name and Title:		Name and Title:		
Address		Address:		
	REGISTERED AGENT			
The <u>name and F</u>	Clorida street address (P.O. Box NOT acceptable)	of the registered agent is:		
Name:	E&F LATIN GROUP LLC	_		
Address:	1820 N CORPORATE LAKES BLVD	<del>-</del>		
	SUITE 109, WESTON, FL 33326	_		
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>	た。 ・		
The name and a	address of the Incorporator is:	्च <sup>'</sup> ञ '		
Name:	DIEGO FIGUEROA			
Address:	1820 N CORPORATE LAKES BLVD			
	SUITE 109, WESTON, FL 33326	2: 06		
ARTICLE VIII Effective date, i (If an effective filing.)	EFFECTIVE DATE: f other than the date of filing: 08/23/2022 date is listed, the date must be specific and can-	(OPTIONAL) not be more than five days prior or 90 days after the		
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Having been no this certificate, i	omed ax registered agent to accept service of proce I am familiar with and accept the appointment or			
		08/23/2022		
	Required Signature/Registered Agent	Dute		
I submit this do	ocument and affirm that the facts stated herein a Department of State constitutes a third degree fei	re true. I am aware that the false information submitted in a ony as provided for in s.817.155, F.S.		
(-1	ICO TIONERA	08/23/2022		
Req	uired Signature/Incorporator	Date		