

2/28/23, 5:19 PM

Division of Corporations

Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
LA MARSERENA CORP

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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: LA MARSERENA CORP

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

Mailing address, if different is:

11461 LAKESIDE DRIVE #4210
DORAL FL 33178

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

100

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ROSMERY TORRES SAENZ (P)

Address 11461 LAKESIDE DRIVE #4210
DORAL FL 33178

JENIFER P HOYOS YANES (T)

Name and Title: _____
Address: 11461 LAKESIDE DRIVE #4210
DORAL FL 33178

Name and Title: TEDDY L MONTEROS TORRES (VP)

Address 11461 LAKESIDE DRIVE #4210
DORAL FL 33178

Name and Title: _____
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: ROSMERY TORRES SAENZ

Address: 11461 LAKESIDE DRIVE #4210
DORAL FL 33178

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ROSMERY TORRES SAENZ

Address: 11461 LAKESIDE DRIVE #4210
DORAL 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.)

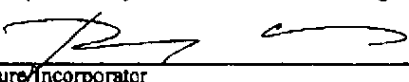
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 Agent

02-15-23
 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/Incorporator

02-15-23
 Date