2 3 0000 2 Flo ision of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CURPORATE FILING SERVICE, INC.

Account Number : 120000000019 : (305)552-5973 Phone : (305)575-5944 Fax Number

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 GAUCHO CAMPESTRE CORP.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

GAUCHO CAMPESTIZE COZP
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
17800 512) 177 AUE MISMIFL 33187
ARTICLE III SHARES; The number of shares of stock is:
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
DIAZ, ANDREA ELIZABETH (JP)
Diaz, ANDREA ELIZABETH (JP)
ARTICLE V INITIAL REGISTERED AGENT AND STREET SPERES;
The name and Florida street address (PO Box not acceptable) of the registered agent is:
The name and Florida street address (10 to a not only 10 to
17800 5W 177AUE 1218MI
33187
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
RICHARD VALERIA
17800 SW 197 AVE MIRMI EL.
33/67

Required Signatures:

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

Mulecul Jaluano 3/22/23.
Registered Agent 1 Pale

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.

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23 HAR 22 PH IZ: 35 SECRETARY OF STATE JALLAHASSEE, FLORIDA