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Division of Corporations

Florida Department of State  
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To:

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

From:

Account Name : LUPA ENTERPRISES INC  
Account Number : I20200000050  
Phone : (727)298-8007  
Fax Number : (305)397-0980

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CORPORATIONS  
COMMERCIAL  
SERVICES

FLORIDA PROFIT/NON PROFIT CORPORATION  
N & F Produce INC

Certificate of Status	0
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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:

N & F Produce INC

## Article II

### Principal Office

Principal ~~street~~ address

1900 N Bayshore Dr Suite 1A #136 -2279  
Miami, Florida, 33132  
United States

Mailing address, if different is:

1900 N Bayshore Dr Suite 1A #136 Miami, Florida, 33132

## Article III

### Purpose

The purpose for which the corporation is organized is:

Importacion de frutos y vegetales

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## Article IV

### Shares

The number of shares of stock is:

100

## Article V

### Initial Officers and/or Directors

Title:

Ramirez Villar Paredes

Address: Calle 13 numero 31 Cerros de Gurabo

Santiago

Santiago

Dominican Republic

51000

## Article VI

### Registered Agent

Name: Lupa Enterprise INC

Address: 100 SE 2nd Street Suite 2000  
Miami, Florida, 33131

## Article VII

### Incorporator

The name and address of the Incorporator is:

Luciana Mordini

1900 N Bayshore Dr. Suite 1A 136.  
Miami, FL 33132

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## 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*

Lupa Enterprises INC

Required Signature/Registered Agent

15-May-2023

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.*

Luciana Mordini

Required Signature/Incorporator

15-May-2023

Date

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