# P23000042824

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
	MAIL
(Business Entity Name)	
(Document Number)	<u> </u>
Certified Copies Certificates of SI	tatus
	<u> </u>
	ŋ
Special Instructions to Filing Officer:	
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# CAPITAL CONNECTION, INC.

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## Mineral Expertise USA Inc

### Please Debit 12000000257 For: 70

Thank you Seth Neeley

>	AQ.
Signature	

Requested	by:	SETH
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06/05/23

Name

Date

Will Pick Up

	Art, of Amend, File	
	RA Resignation	
	Dissolution / Withdrawal	
	Annual Report / Reinstatement	-
	Сеп. Сору	
<b>_</b>	Рного Сору	
	Certificate of Good Standing	
	Certificate of Status	
	Certificate of Fictitious Name	
<u> </u>	Corp Record Search	
	Officer Search	
	Fictitious Search	
	Fictitious Owner Search	
	Vehicle Search	
	Driving Record	
	UCC 1 or 3 File	
	UCC 11 Search	
	UCC 11 Retrieval	
	Courier	

Art of Inc. File\_\_\_\_\_

L.C. File\_\_\_\_\_

Merger File\_\_\_\_

LTD Partnership File\_\_\_\_\_ Foreign Corp. File\_\_\_\_\_

Fictitious Name File\_\_\_\_\_

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In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

<u> RTICLE II PRINCIPAL OFFICE</u>	
Principal street address	Mailing address, if different is:
8117 Biscayne Boulevard, Suite 2740	18117 Biscayne Boulevard, Suite 27
liami, FL 33160	Miami, FL 33160
<u>RTICLE III _ PURPOSE</u> re purpose for which the corporation is organized is: Import /	Export Stones
e purpose for which the corporation is organized is.	
	· · · · · · · · · · · · · · · · · · ·
<u></u>	
<u> TICLE IV SHARES</u>	
e number of shares of stock is: 100	
<u> RTICLE V INITIAL OFFICERS AND/OR DIRECTORS</u>	
Name and Title:Rene Camart - Officer	Name and Title:
Address 18117 Biscayne Boulevard, Suite 274	0 Address:
	o Address.
Miami, FL 33160	
Name and Title:	Name and Title:
	Name and Title:
Name and Title:	Name and Title:
Name and Title:	Name and Title:
Name and Title:	Name and Title:   Address:
Name and Title:	Name and Title:   Address:
Name and Title:Address	Name and Title:
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Name and Title:Address	Name and Title:
Name and Title:	Name and Title:
Name and Title:	Name and Title:

Name	and Title:	Name and Title:	
Addro	255	Address:	
	<u> </u>		
	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Teresa L De La Rosa C.P.A, P.A.		
Address:	814 Ponce De Leon Blvd Suite 204	_	
	_Coral Gables, FL 33134	_	
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>		

The name and address of the Incorporator is:

Rene Camart Name:

18117 Biscayne Boulevard, Suite 2740 Address:

Miami, FL 33160

ARTICLE VIII EFFECTIVE DATE:

filing.)

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

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

Teresa L De La Rosa Required Signature/Registered Agent

5/19/2023 Date

2023 J.:

그목 나: 58

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5/19/2023

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

Date