

P2300004279

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H23000207710 3)))



H230002077103ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From:
Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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
LLAO LLAO USA CORP

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

RECEIVED

2023 JUN -8 PM 3:24

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
ELECTRONIC FILING SERVICE

Electronic Filing Menu

Corporate Filing Menu

Help

SECRETARY OF STATE
TALLAHASSEE, FL

2023 JUN -8 PM 1:26

FILED

Florida Department of State
Attention: New Filings Section

To whom it may concern:

This is to advise that the owners of

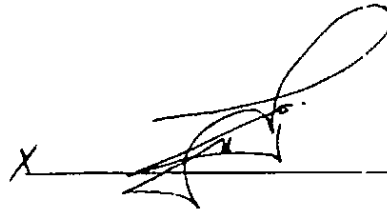
LLAO LLAO USA Corp

of Document # P16 0000 91662

are the same owners of the attached articles. We have dissolved the company and have no intention of reopening it.

Thank you for your help in this matter.

Thanks,

A handwritten signature in black ink, appearing to be 'X' followed by a stylized name, is written over a horizontal line.

FILED

2023 JUN -8 PM 1:26

SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:Llao Llao USA CORP**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

P: 19600 SW 136 STMIAMI FL 33196PO BOX Pobox 901473 HOMESTEAD FL 33090**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Juan Carlos Espinosa (P)

2023 JUN -8 PM 1:26
SECRETARY OF STATE
TALLAHASSEE FL

FILED

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Juan Carlos Espinosa19600 SW 136 ST MIAMI FL 33196**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Juan Carlos Espinosa19600 SW 136 ST MIAMI FL 33196

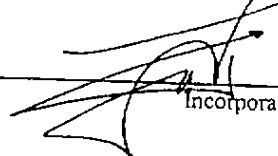
Required Signatures:

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



Registered Agent _____ 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.



Incorporator _____ Date _____

TAX ID : 814411635

FILED

2023 JUN -8 PM 1:26

SECRETARY OF STATE
TALLAHASSEE, FL