# P23000054355

(Re	equestor's Name)	· <del>-</del> · ·
(Ac	ddress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	
·	,	•
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Name	<del>)</del>
(Dc	ocument Number)	<del></del>
Certified Copies	Certificates of	of Status
	_	- · - · -
<u> </u>		
Special Instructions to	Filing Officer:	
		ľ
<u> </u>	<del></del>	

Office Use Only



s. CHATHAM 00411741012

97/24/23--01001--022 \*\*70.00

PHARADIBL 21 PH S 5

## CORPORATE ACCESS, \_\_

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

### **WALK IN**

	PIC	K UP:	BROOK 7/21	_ <del></del>
XX	CERTIFIED COPY PHOTOCOPY			
	CUS			
XX	FILING	INC		
-	212 AGENCY CORP (CORPORATE NAME AND DOC	CUMENT #)		
-	(CORPORATE NAME AND DOC	CUMENT #)		
_	(CORPORATE NAME AND DOC	SUMENT #)		<del> </del>
-	(CORPORATE NAME AND DOC	CUMENT #)		
_	(CORPORATE NAME AND DOC	UMENT #)		
_	(CORPORATE NAME AND DOC	HMENT #)		
ECIAL				

#### **COVER LETTER**

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	212 AGENCY CORP			
	(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u> )			
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:	
⊠ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	& Certificate of Status	
FROM:		Roth Neumann, Esq.		
	Nam	e (Printed or typed)		
	1000 Brid	ekell Ave., Suite 1100		
		Address		
	Mi	ami, FL 33131		
<del></del>	City, State & Zip			
	(30	05) 798-8878		
<del>-</del>		Telephone number		
	irina@.	rothpalaw.com		
	E-mail address: (to be use	d for future annual report r	iotification)	

NOTE: Please provide the original and one copy of the articles.

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

TICLE II PRINCIPAL OFFICE Principal street address		Mailing address, if different is:	
			waning address, it different is.
480 NW 25th Str	eet Suite 115 Miami Fl 33182	12480 NV	W 25th Street Suite 115 Miami Fl 331
ETICLE III PURPO e purpose for which t	OSE  he corporation is organized is: Any and	d all lawful bus	siness
	· · · · · · · · · · · · · · · · · · ·	<del>-</del>	2
			723
_			
<del>_</del>			
TICLE V INITIA	stock is:		
TICLE V INITIA		Name and Titl	le: Rigoberto Lanz, Director
TICLE V INITIA	stock is:	Name and Titl Address:	le: Rigoberto Lanz, Director  Calle Ppal. Callejón San Camilo, Edificio
TICLE V INITIA  Name and Title	LOFFICERS AND/OR DIRECTORS  Miguel Bethencourt, Director		
TICLE V INITIA  Name and Title	L OFFICERS AND/OR DIRECTORS  Miguel Bethencourt, Director  Calle Martinez Izquierdo 49,		Calle Ppal. Callejón San Camilo, Edificio
TICLE V INITIA Name and Title Address	LOFFICERS AND/OR DIRECTORS  Miguel Bethencourt, Director  Calle Martinez Izquierdo 49,  Piso 5C, Madrid, España. 28028	Address: 	Calle Ppal. Callejón San Camilo, Edificio  Residencias Suites Las Taparitas, piso PH. Apte
TICLE V INITIA Name and Title Address	LOFFICERS AND/OR DIRECTORS  Miguel Bethencourt, Director  Calle Martinez Izquierdo 49,  Piso 5C, Madrid, España. 28028	Address;   Name and Title	Calle Ppal. Callejón San Camilo, Edificio  Residencias Suites Las Taparitas, piso PH. Apto  Urb. La Florida, Caracas, Venezuela. 1050.
Name and Title:  Name and Title:	L OFFICERS AND/OR DIRECTORS  Miguel Bethencourt, Director  Calle Martinez Izquierdo 49,  Piso 5C, Madrid, España. 28028	Address;   Name and Title	Calle Ppal. Callejón San Camilo, Edificio  Residencias Suites Las Taparitas, piso PH. Apto  Urb. La Florida, Caracas, Venezuela. 1050.
Name and Title:  Name and Title:	L OFFICERS AND/OR DIRECTORS  Miguel Bethencourt, Director  Calle Martinez Izquierdo 49,  Piso 5C, Madrid, España. 28028	Address;   Name and Title	Calle Ppal. Callejón San Camilo, Edificio  Residencias Suites Las Taparitas, piso PH. Apto  Urb. La Florida, Caracas, Venezuela. 1050.
Name and Title:  Name and Title:  Address	L OFFICERS AND/OR DIRECTORS  Miguel Bethencourt, Director  Calle Martinez Izquierdo 49,  Piso 5C, Madrid, España. 28028	Address: Name and Title Address:	Calle Ppal. Callejón San Camilo, Edificio  Residencias Suites Las Taparitas, piso PH. Apte  Urb. La Florida, Caracas, Venezuela. 1050.
Name and Title:  Name and Title:  Address	L OFFICERS AND/OR DIRECTORS  Miguel Bethencourt, Director  Calle Martinez Izquierdo 49,  Piso 5C, Madrid, España. 28028	Address: Name and Title Address: Address: Name and Title	Calle Ppal. Callejón San Camilo, Edificio  Residencias Suites Las Taparitas, piso PH. Apto  Urb. La Florida, Caracas, Venezuela. 1050.

Name a	nd Title:	Name and Title:	
Addres	ss	Address:	
ARTICLE VI	REGISTERED AGENT		
Name:	Florida street address (P.O. Box NOT acceptable) Roth Private Advising Law	of the registered agent is:	
Address:	1000 Brickell Ave., Suite 1100	_	
. 1441 033.	Miami, FL 33131	<del></del>	
		_	
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>		
The name and a	address of the Incorporator is:		202
Name:	Miguel Bethencourt	_	2023 JUL
Address:	Calle Martinez Izquierdo 49,	_	. 🔼
	Piso 5C, Madrid, España. 28028	<del>-</del>	<u> </u>
ARTICI E VIII	EFFEÇTIVE DATE:		Pi112: 0;
Effective date, i	f other than the date of filing:	(OPTIONAL)	. 10
(If an effective filing.)	date is listed, the date must be specific and can	not be more than five days prior	or 90 days after th
Note: If the dat	e inserted in this block does not meet the applicab	le statutory filing requirements, th	is date will not be li
the document's	effective date on the Department of State's record	s.	
Having been nai	med as registered agent to accept service of process	; for the above stated corporation at	the place designate
certificate I am	familiar with and accept the appointment as regist	ered agent and agree to act in this	capacity
cernyreate, rum			07/19/2023
	Deviced Cinesary Processed A	<del>-</del>	
<del></del>	Required Signature/Registered Agent		Date
I submit this do	Required Signature/Registered Agent cument and affirm that the facts stated herein ar Department of State constitutes a third degree felo	re true. I am aware that the false to ony as provided for in s.817.155, F.	information submitt

.