P24000000373

(Requestor's Name)
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,
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.





100419909291





TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-624 PLEASE USE FUNDS FROM THIS ACCOUNT: I20210000160: \$78.75 AUTHORIZATION SIGNATURE: _____ Tropical Puffs East Corp **BUSINESS** Document # Pick up time____ Walk in Mail out Will wait Photocopy X Certified Copy Certificate of Status **NEW FILINGS AMMENDMENTS** Profit _Amendment Not for Profit Resignation of R.A. Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger X CORP Conversion **OTHER FILINGS** REGISTERATION/QUALIFICATIONS Annual Report ___ Foreign filing ____Limited Partnership Fictitious Name Reinstatement APOSTIL()_____ Other

· FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DRIVE

Country

XAMINER'S INITIALS:

FLORIDA CAPITAL COURIER SERVICES, INC
 2330 CLARE DRIVE
 TALLAHASSEE, FL 32309
 (850) 524-5437
 (850) 524-624

:XAMINER'S INITIALS:_____

	-
BUSINESS	Document #
Walk in	Pick up time
Mail out	Will wait
Photocopy	
Certified Copy	
Certificate of Status	
<u>NEW FILINGS</u>	<u>AMMENDMENTS</u>
Profit Not for Profit Limited Liability Domestication Other X CORP	AmendmentResignation of R.A. Officer/DirChange of Registered AgentDissolution/WithdrawalMergerConversion
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual Report	Foreign filing
Fictitious Name	Limited PartnershipReinstatement

COVER LETTER

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

SUBJECT:	1 KOP (COL PULFS) PROPOSED CORPORA	East (ORP.	UDE SUFF(X)
	(FROPOSED CORPORA	11. SAME - <u>MUST INCL</u>	<u>ude suffix</u>)
Enclosed are an orig	final and one (1) copy of the arti	cles of incorporation and	la check for:
□ \$70.00 Filing Fee	☐ \$78,75 Filing Fee & Certificate of Status	☑ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM:	Alejandro f	(Printed or typed)	
_	1280 W 63 S	TCPT ddress	
<u></u>	Higlean, Floric	(a, 33012 state & Zip	
	(305) 588 - Daytime Te	7910 dephone number	
	alexahoover 6 09 m	Oal Com for luture annual report n	otification)

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 and or Chapter 621, $\Gamma(S)$ (Profit)

ARTICLE 1 N4ME The name of the corporati	ion shall be TROPICAL PUF	ts East (CBP.	
ARTICLE II PRINC		Mailing address. 12 80 W 63 H	. LaTerant o
ARTICLE III PURPO The purpose for which if	NSE ne corporation is organized is <u>Ref</u> C		
ARTICLE IV SHARI The number of shares of	es Stock is <u>[00</u>		
	<u>LOFFICERS AND OR DIRECTORS</u> DIESECTOR AREJUMIO A. CUEVO	IS Name and Title:	
	1280 W 63 Street, Higher, FL, 33012	Address.	
Name and Title:		Name and Title:	
Address		Address:	2023 0.:
			r)
			•

Name and Tit	le	Name and Title	
Address		Address	
		. <u> </u>	
		. <u></u>	
ARTICLE VI REG The name and Florid:	<u>ISTERED AGENT</u> <u>a street address</u> (P.O. Box SOT acceptable) of	the registered agent is	:
Name.	A levandro A. Cuevas	-	
Address\	280 W G3 Street,	-	
<u>H</u>	191897, FL, 33012	-	
<u>ARTICLE VII INC</u>	<u>ORPORATOR</u>		
The name and addres	s of the Incorporator is:		
Name:	Alexandro A. cuevas	-	
Address:	1280 W 63 STIPET,	-	
	Higlean, Fc, 33012	-	
filing.) Note: If the date inser	s listed, the date must be specific and cannot ried in this block does not meet the applicable ive date on the Department of State's records.		
Having been named a certificate, I am famili)	or the above stated cor ed agent and agree to	porution at the place designated in this act in this capacity 12 /28 /2023
T T	Required Signature/Registered Agent		Date
I submit this documer document to the Depar	nt and affirm that the facts stated herein are riment of State constitutes a third degree felon (true. I am aware tha v as provided for in s.)	317.155, F.S.
Required Signature/In-	corporator		Date 12/28/2023
			2
			2023 :
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			. 25