

2/4/25, 7:46 PM

Division of Corporations

Florida Department of State

Division of Corporations
Electronic Filing**P25000006493**

2-6-25

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.

(((H250000439713)))



H250000439713ABC+

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 : ALEX PINA CO.
Account Number : I20190000095
Phone : (305)803-8471
Fax Number : (305)602-3977

25 JAN -5 PM 12:41

FILED
SECRETARY OF STATE
TALLAHASSEE, FL

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: client@alexpina.co

FLORIDA PROFIT/NON PROFIT CORPORATION
GANAAUTO SALES CORP

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

2025 FEB -5 PM 12:41
FILED
TALLAHASSEE, FL

2025 FEB -5 AM 8:31

RECEIVED

Electronic Filing Menu

Corporate Filing Menu

Help

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: ALEX PINA CO.
Address: 8400 NW 36TH ST STE 450
DORAL, FL 33166

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MARIA G FLORES
Address: 8530 NW 66th St
Doral, FL 33166

FILED
DEPARTMENT OF STATE
25 JAN -5 PM 12:41

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

Required Signature/Registered Agent
Date 02/04/2025

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 02/04/2025