

To:

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From: Alex Pino

P25000001720

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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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

****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
DISTRIBUCIONES SAR CORP

Certificate of Status	0
Certified Copy	0
Page Count	03
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RECEIVED

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ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: **DISTRIBUCIONES SAR CORP****ARTICLE II PRINCIPAL OFFICE**Principal street address
2010 LUDLAM RD APT 704

Mailing address, if different is:

MIAMI, FL 33155

ARTICLE III PURPOSEThe purpose for which the corporation is organized is: **Any And All Lawful Purpose.****ARTICLE IV SHARES**The number of shares of stock is: **10,000****ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: **SERGIO M HERNANDEZ SILVA - President**

Name and Title: _____

Address **2010 LUDLAM RD APT 704**

Address: _____

MIAMI, FL 33155

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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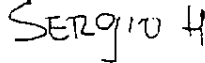
Name and Title: _____ Name and Title: _____

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: SERGIO M HERNANDEZ SILVAAddress: 2010 LUDLAM RD APT 704
MIAMI, FL 33155**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*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 §.817.155, F.S.*_____
Required Signature/Incorporator

Date _____

2025 JAN 9 PM 7:46
01/09/2025

Date

P

7:46

PM

01/09/2025