

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

P2400010384

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.

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

From: Account Name : PRIME CORPORATE FILING SERVICES LLC
Account Number : I20230000092
Phone : (786)356-1156
Fax Number : (305)564-6768

2024 FEB -8 PM 12:12

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

Email Address: INFO@PRIMEFILING.COM

**FLORIDA PROFIT/NON PROFIT CORPORATION
MARCANGRE USA CORP**

| | |
|-----------------------|---------|
| Certificate of Status | 1 |
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$78.75 |

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED

T.J.H.
2/9/24

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: MARCANGRE USA CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address
1818 SW 1ST AVE SUITE 2015
MIAMI, FL 33129

Mailing address, if different is:
1818 SW 1ST AVE SUITE 2015
MIAMI, FL 33129

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: IMPORT, EXPORT, DISTRIBUTION OF SEAFOOD

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Pedro X. Lizaraburu (President)
Address: 1818 SW 1st Ave Suite # 2015
Miami, FL 33129

Name and Title: La Pata Gorda LLC (Vice-President)
Address: 1818 SW 1st Ave Suite # 2015
Miami, FL 33129

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

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: Prime Corporate Filing Service LLC

Address: 1818 SW 1st Ave Suite # 2015
Miami, FL, 33129

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Pedro X. Lizarzaburu

Address: 1818 SW 1st Ave Suite # 2015
Miami, FL 33129

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 TALLAHASSEE, FLORIDA

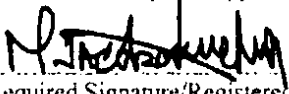
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 02/05/2024 (OPTIONAL)

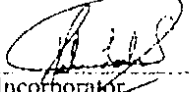
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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

 02/05/2024
 Required Signature/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 document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

 02/04/2024
 Required Signature/Incorporator Date

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