

P19006045595

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

(((H19000176966 3)))



H190001769663ABCC

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 : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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

Email Address: _____

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
19 JUN -4 PM 12:06

FLORIDA PROFIT/NON PROFIT CORPORATION
ROBE SERVICE CORP

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

2019 JUN -4 PM 2:06

FILED

C RICO
JUN 04 2019

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

RoBE Service Corp

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

9581 Fontainebleau Blvd apt 644
Miami Fla 33172

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
19 JUN -11 PM 12:06

ARTICLE III SHARES: The number of shares of stock is:

100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

José Raúl Rodríguez López (P)
Marlow Joel Munguía Robales (VP)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

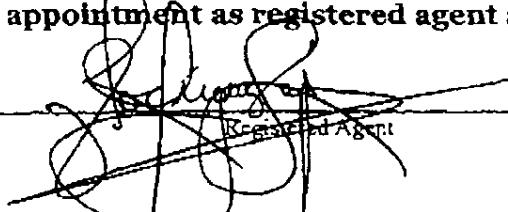
José Raúl Rodríguez López
9581 FONTAINEBLEAU BLVD #614

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

José Raúl Rodríguez López
9581 Fontainebleau Blvd apt 614
Miami, Fla 33172

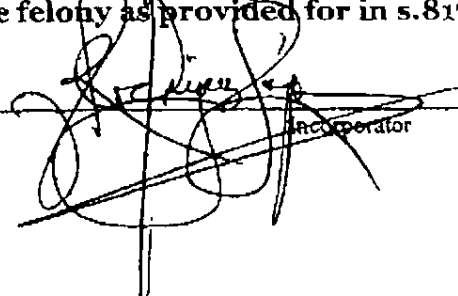
Required Signatures:

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



 _____ Date

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.



 _____ Date

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 19 JUN -1 14 12: 06