Florida Department of State

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ARTICLES OF INCORPORATION

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

	CIPAL OFFICE Principal street address	Ma	Mailing address, if different is: 2001 LUDLAM RD. APT 653		
001 LUDLAM RD. AP	T 653	2001 LUDLA			
MIAMI, FL 33155		MIAMI, FL 3	3155		
RTICLE III PURPO ne purpose for which t	OSE he corporation is organized is:				
NY AND ALL LAWFU	L BUSINESS				
e number of shares of	stock is:				
Name and Title	LOFFICERS AND/OR DIRECTORS P: LADY C. JAUREGUI MORALES	Name and Title:	· · · · · · · · · · · · · · · · · · ·		
RTICLE V INITIA	L OFFICERS AND/OR DIRECTORS	•			
Name and Title	LOFFICERS AND/OR DIRECTORS P: LADY C. JAUREGUI MORALES	Name and Title:			
Name and Title Address	LOFFICERS AND/OR DIRECTORS P: LADY C. JAUREGUI MORALES 2001 LUDLAM RD. APT 653	Name and Title: Address:			
Name and Title Address	LOFFICERS AND/OR DIRECTORS P: LADY C. JAUREGUI MORALES 2001 LUDLAM RD. APT 653 MIAMI, FL 33155	Name and Title: Address: Name and Title:			
Name and Title Address Name and Title:	L OFFICERS AND/OR DIRECTORS P: LADY C. JAUREGUI MORALES 2001 LUDLAM RD. APT 653 MIAMI, FL 33155	Name and Title: Address: Name and Title:			
Name and Title Address Name and Title: Address	L OFFICERS AND/OR DIRECTORS P: LADY C. JAUREGUI MORALES 2001 LUDLAM RD. APT 653 MIAMI, FL 33155	Name and Title: Address: Name and Title: Address:			

Name a	and Title:	Name and Title:		
Addres	35	Address:		
·				
ARTICLE VI The name and I	REGISTERED AGENT Torida street address (P.O. Box NOT accepta	ble) of the registered and in		
Name:	LADY C. JAUREGUI MORALES	ore) of the registered agent is:		
Address:	2001 LUDLAM RD. APT 653			
	MIAMI, FL 33155		• •	
ARTICLE VII	INCORPORATOR			
i ne <u>name and a</u>	ddress of the Incorporator is:			
Name:	LADY C. JAUREGUI MORALES			
Address:	2001 LUDLAM RD. APT 653	 		
	MIAMI, FL 33155			
Effective date, if	other than the date of filing: 11/19/2019 ate is listed, the date must be specific and co	. (OPTION	IAL) ys prior or 90 days after the	
Note: If the date the document's ef	inserted in this block does not meet the applic ffective date on the Department of State's reco	able statutory filing requiren rds.	nents, this date will not be listed as	
Having been nan this certificate, I o	ned as registered agent to accept service of pro om familiar with and accept the appointment a	ocess for the above stated co s registered agent and agree	rporation at the place designated in to act in this capacity	
×	Required Signature/Registered Agent	<u> </u>	11/19/2019	
	Required Signature/Registered Agent		Date .	
I submit this doci document to the L	ument and affirm that the facts stated herein Department of State constitutes a third degree j	are true. I am aware that the control of the contro	he false information submitted in a 7.155, F.S.	
× (ay didin		11/19/2019	
Requir	red Signature Incorporator		Date	