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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:\_\_

## FLORIDA PROFIT/NON PROFIT CORPORATION PANSON CORP

Certificate of Status	0
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Corporate Filing Menu

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## ARTICLES OF INCORPORATION In compliance with Chapter-607 (Profit)

PANSON CO	)RP
ARTIC	CLE II PRINCIPAL OFFICE:
The principa	al street address and mailing address is:
4015 GROV	E PL
	FL 33810
TOLE HIL GIVEN	
ICLE III SHARES:	The number of shares of stock is: 100
ARTICLE IV II	NITIAL DIRECTORS AND/OR OFFICERS:
PRESIDENT	LAZARO ALEXANDER MORGADO
VICE PRESIDENT	CRISTIAN ALEXANDER MORGADO
TICLEV INITIAL.	REGISTERED AGENT AND STREET ADDI
	ddress (PO Box not acceptable) of the registered
	MORGADO
	KELAND FL 33810
1015 GROVE PL LA	
1015 GROVE PL LA	

## 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

Lazaro A Morgado

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 a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Lazaro A Morgado
Incorporator