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FLORIDA PROFIT/NON PROFIT CORPORATION 2T SERVICES, INC

Certificate of Status	0
Certified Copy	1
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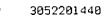
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APR 10 2019



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

CLE II PRINCI. P	PAL OFFICE rincipal street address		Mailing address, if different is:
HARBOUR SIDE I		15047	<u> </u>
		1504 F	IARBOUR SIDE DR
ON, FL 33326		WEST	ON, FL 33326
CLE III PURPOS repose for which the	E corporation is organized is:	·	
AND ALL LAWFU	JL BUSINESS		
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<u> </u>		-	
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mber of shares of sto	ock is:		
mber of shares of sto	OFFICERS AND/OR DIRECTORS		
mber of shares of store "LE V INITIAL Name and Title:	OFFICERS AND/OR DIRECTORS DOSE R TIRADO TORO HARBOUR SIDE DR	Name and Titl	e:
TLE V INITIAL Name and Title: Address	OFFICERS AND/OR DIRECTORS DOSE R TIRADO TORO HARBOUR SIDE DR		e:
The V INITIAL Name and Title: Address	OFFICERS AND/OR DIRECTORS : JOSE R TIRADO TORO 504 HARBOUR SIDE DR	Name and Titl	
TLE V INITIAL Name and Title: Address	OFFICERS AND/OR DIRECTORS : JOSE R TIRADO TORO 504 HARBOUR SIDE DR	Name and Titl	
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mber of shares of store in the	OFFICERS AND/OR DIRECTORS D: JOSE R TIRADO TORO S04 HARBOUR SIDE DR VESTON, FL 33326	Name and Titl Address: Name and Titl Address: Address:	e:
mber of shares of sto CLE V INITIAL Name and Title: Address Name and Title: Address	OFFICERS AND/OR DIRECTORS D: JOSE R TIRADO TORO S04 HARBOUR SIDE DR VESTON, FL 33326	Name and Title Address: Name and Title Address: Name and Title Name and Title	e:

Name an	od Title:	Name and Title:				
Address						
ARTICLE VI The name and Fi	REGISTERED AGENT orida stroet address (P.O. Box NOT accepta	No Cut.				
Name:	JOSE R TIRADO TORO	ote) of the registered agent is:				
Address:	1504 HARBOUR SIDE DR					
	WESTON, FL 33326					
ARTICLE VII	NCORPORATOR					
The name and ad	dress of the Incorporator is:					
Name:	JOSE R TIRADO TORO					
Address:	1504 HARBOUR SIDE DR	·				
	WESTON, FL 33326					
Effective date, if o	EFFECTIVE DATE: 04/08/2019 ther than the date of filing:	(OPTIONAL)				
filing.)	te is testeu, the date must be specific and ex	annot be more than five days prior or 90 days after the				
Note: If the date it the document's eff	nserted in this block does not meet the applic ective date on the Department of State's reco	able statutory filing requirements, this date will not be listed as				
Having been name this certificate, I an	ed as registered agent to accept service of pro in familiar with and accept the appointment a	cess for the above stated corporation at the place designated is registered agent and agree to act in this capacity				
j	a tono	04/08/2019				

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 follows as provided for in s.817.155, F.S.

04/08/2019

Date

Required Signature/Registered Agent

Required Signature/Incorporator