Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I200000000019

Phone

: (305)552-5973

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

Enail	Address:			
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## FLORIDA PROFIT/NON PROFIT CORPORATION DIAZ ALFO SERVICES CORP

Certificate of Status	0
Certified Copy	
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Estimated Charge	\$78.75

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## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

**ARTICLE I** NAME: The name of the corporation is:

Plaz alfo services conf
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
9625 NW 27 Th ave
MIAMI FL 33147
ARTICLE III SHARES: The number of shares of stock is:
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
IVan Diaz alfonso (P)
ARTICLE V INTITAL REGISTERED ACCENT AND GOD TO
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is:
- Van 1) (a2 a/ Karasa - ~ ~
9625 444 33 71 3 3
MIAMI FL 33 147
ARTICLE VI INCORPORATION. The
The name and address of the Incorporator is:
- Yan Diaz alfonso 9625 NW 27 Th ave
MIANI FL 33147

## 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

Registered Agent

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 S ate constitutes a third degree felony as provided for in s.817.155, F.S.

Incorporator C ste

2025 JAN 21 PM 4: 59