	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	SECRETARY OF STATE SECRETARY OF STATE STVISION OF CORPORATION 19 JUL -3 PM 3: 42
DOCUMENT # PO6000 1. Corporation Name Eric Ocando Genera	0092999 1 Services, Inc	
2. Principal Office Address - No P.O Box # 6884 Athrng Pr Suite, Apt. #, etc	3. Mailing Office Address 6584 Athena Dr. Suite, Apt #, etc.	CR2E081 (11/10)
City & State Lake Worth, FL Zip Country 33463 USA	City & State Lake Worth, FL Zip 33463 USA	4. Date Incorporated or Qualified To Do Business in Florida 7/11/24 5. FEI Number 40-5414607 6. CERTIFICATE OF STATUS DESIRED \$8.75 Addition for a Certific
Name Eric Ocando Steet Address (PO Box Number is Not Acceptable G884 Athene Dr Suite Apt. #, Etc.	State Zip Code	
B. I, being appointed the registered agent of the ab Sig-ature of Registered Agent	FL 33463	Date $G/26/19$
Name of	nd/or Director (Florida nonprofit corporations must list a Street Address of E	
Pres Eric Ocan		ABOVE
		602331756306 07/08/1301002004 **750.
diss Sox 22		JUL 0 3 2019
<sup>10</sup> E-mail Address: OCapac	(vofing Dgmail-co) (vofing Dgmail-co)	D CUSHIN
<ol> <li>I certify that I am an officer or director or the recorreinstatement application, the reason for dissolutions over by the corporation have been paid. I further if made under oath, I am aware that false information SIGNATURE:</li> </ol>	enver or trustee empowered to execute this application from has been eliminated, the corporate name satisfies if er certify, the information indicated on this application is	The as provided for in chapter 607 or 617, F.S. I further certify that when the requirements of section 607.0401 or 617.0401, F.S., and the true and accurate, and my signature shall have the same legal the constitutes a third degree felony as provided for in s 817.151 6/26/19