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LAZARUS CORPORATE FILING SERVICE

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MIAMI, FL 33165 (305) 552-5973 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Document #) (Corporation Name) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time 1.00 Certified Copy Walk in Mail out 📕 Will wait Photocopy Certificate of Status **NEW FILINGS** <u>AMENDMENTS</u> Profit Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication ☐ Dissolution/Withdrawal Other Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other Examiner's Initials

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ARTICLES OF INCORPORATION

06 OCT 19 PM 1:44

The undersigned Incorporator(s), for the purpose of forming a RETARY OF STATE corporation under the Florida Business Corporation Act, hereby adopt(s) LORIDA the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

VIERA BOBCAT, SERVICE FUC.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

431 NW 132 cT Miami F/ 33182.

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 Shares of \$ 1.00.

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Jorge L Viena 431 NW 132 CT Mami F/ 33182

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V - INCORPORATOR

ARTICLE VI- DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

Lorge L. Viera - President

431 NW 132CT Hami F/331P2

LAZARO N. CRUZ - Ucepresident

431 NW 132CT Hami F/331P2

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature