Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC

Account Number : I20000000019

: (305)552-5973

Phone 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.

Address:			

FLORIDA PROFIT/NON PROFIT CORPORATION CASTLE REEF CONSULTANTS INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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

ARTICLE	II PRINCIPAL OFFICE:	,
. The principal st	treet address and mailing address is:	
2635 SW. 7	8 Ave	
Mi Ani, Ff	33155	
,		
		<u> </u>
ICLE III SHARES: The	e number of shares of stock is:)
	WAT DIRECTED AND OD OFFICERO	٥.
	TIAL DIRECTORS AND/OR OFFICERS $ \frac{1}{\sqrt{2\pi}} (P) $	<u>>:</u>
Jonge L. Jus	\$10	
		•
RTICLE V INTIIAL RE	GISTERED AGENT AND STREET AD	DRESS:
name and Florida street add	ress (PO Box not acceptable) of the registere	ed agent
	JUSTO	
Jorge L.		
<u>Jorge L.</u> 2635 S.W	. 78 ave.	
Jorge L. 2635 S.W Migni F	. 78 ave.	
Jorge L. 2635 S.W Miami f	. 78 gve. FL 33155	
Miami s	. 78 QVE. FL 33 155 ATOR: The name and address of the Incor	porator

H15000054 45

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

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.