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Florida Department of State
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.
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**FLORIDA PROFIT/NON PROFIT CORPORATION
MILA SERVICE USA INC**

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

15 MAY -5 PM 3:37

15 MAY -5 PM 12:05

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME: The name of the corporation is:MILA Service Usa Inc**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

6820 White Oak Dr,
Miami Lakes, FL, 33014**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Miguel A Lara (P)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Miguel A Lara
6820 White Oak Dr,
Miami Lakes, FL, 33014**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Miguel A Lara
6820 White Oak Dr,
Miami Lakes, FL, 33014

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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

Miguel A. Lara 5/5/15
Registered Agent Date

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.

Miguel A. Lara 5/15/15
Incorporator Date

15 MAY - 9 PM 12:03

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