	Florida Department of State Division of Corporations Electronic Filing Cover Sheet
Note: Pl number	ease print this page and use it as a cover sheet. Type the fax audit (shown below) on the top and bottom of all pages of the document.
	(((H15000129306 3)))
Note: DC	NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.
To:	Division of Corporations Fax Number : (850)617-6381
From	: Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944
annu	ne email address for this business entity to be used for future al report mailings. Enter only one email address please.** 1 Address:
15 MAY 29 PH 4: 17	LORIDA PROFIT/NON PROFIT CORPORATION FOSTERING NEW BEGINNINGS CORP.

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04/09/2033 05:23	#3583 P. 002/003
ARTICLES OF INCORPORATION	15000129305
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit	) ALED
	15 HAY 29 PH 1: 17
ARTICLE I NAME: The name of the corporation is:	PERSONAL YOU ST.
	ALLARIAS TELE FLORINA
tostering New Beginni	nep corp
ARTICLE II PRINCIPAL OFFICE:	Ĵ
The principal street address and mailing address is:	
	<u> </u>
ARTICLE III SHARES: The number of shares of stock is:OO	2
ARTICLE IV INITIAL DIRECTORS AND/OR OFFIC	CERS:
Aliha Noverro - Hes.	
Alibe Nevero- V. Pres	>,
Alina Navara - Spc. 2	TOOL
·	
ARTICLE V INITIAL REGISTERED AGENT AND STREET	ADDRESS:
The name and Florida street address (PO Box not acceptable) of the reg	pstered agent is:
Alina Navarro	
12851 SW 47 TERR	· · ·
	[·
MIAMI FL 33175	
ARTICLE VI INCORPORATOR: The name and address of the	Incorporator is:
<u>Alina Navarro</u>	
12851 SW 47 TERR	
MIAMI FL 33175	
MIAMI FL 33115	· · · · · · · · · · · · · · · · · · ·
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H15000129306

## #3583 P.003/003 04/09/2033 05:24 H15000129300 **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 ! submit this document and affirm that the facts stated herein are true. I am ware 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. • • • S HAY 29 P 2 of 2 H15000129306