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Florida Department of State

Division of Corporations

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TO: FLORIDA DEPARTMENT OF STATE
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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
INTEGRAR-FORMACION INTEGRAL DEL SER INC**

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

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TALLAHASSEE, FLORIDA

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

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ARTICLE I NAME: The name of the corporation is:

INTEGRAR- FORMACION INTEGRAL DEL SER INC

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

1320 SW 93 CT MIAMI FL 33174

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

ZORAIDA JIMENEZ (P)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

ZORAIDA Jimenez
1320 SW 93 CT Miami
FL 33174

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

ZORAIDA Jimenez
1320 SW 93 CT Miami
FL 33174

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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

Lorinda J. Smith 08-11-15
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.

Lorinda J. Smith 08-11-15
Incorporator Date

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