

7/30/2033

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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 DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

16 JAN 19 PM 2:05

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
REAL TRUST SERVICES INC.**

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

Handwritten signature and date 1/20

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:Real Trust Services, Inc.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

3701 N.W. 24 Ave #2
Miami FL 33142**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Olga Mendoza (P)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Olga Mendoza
3701 NW 24 Ave #2
Miami FL 33142**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Olga Mendoza
3701 NW 24 Ave #2
Miami FL 33142

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA**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

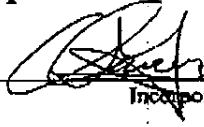


Registered Agent

1-14-16

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.



Incorporator

1-14-16

Date

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