Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000093458 3)))



Note: DO 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 3 Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : I20000000019 : (305)552-5973 : (305)675-5944 Fax Number er the email address for this business entity to be used .d. annual report mailings. Enter only one email address please.* **Enter the email address for this business entity to be used for future Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION BODIES BY CARMEN INC.

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

Electronic Filing Menu Corporate Filing Menu

Help

H16000093458

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

16 APR 14 PM 12: 33

	ARTICLE I NAME: The name of the corporation ARTASSEE FLOR
	BODIES BY CARMEN INC.
	ARTICLE II PRINCIPAL OFFICE;
	The principal street address and mailing address is:
	8500 SW 150 TERRACE
•	PALMETTO BAY FL 33158
•	
•	
RTIC	CLE III SHARES: The number of shares of stock is: 100
	APPEAR DE TAYERES DEPENDE SAID (OF OFFICERO
)	ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
<u></u>	CAIRMEN FIEIRNANDEZ
A TOO	
	ICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
ie na	me and Florida street address (PO Box not acceptable) of the registered agent i
	CARMEN HERNANDEZ
	8500 SW 150 TERRACE
	PALMETTO BAY, FL 33158
RTI	CLE VI INCORPORATOR: The name and address of the Incorporator is
	CARMEN HERNANDEZ
	8500 SW 150 TERRACE

H16000093458

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

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 \$.817.155, F.S.

Incorporator

HII 6000093458