

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

P16000042701

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.

(((H16000121958 3)))



H160001219583ABC0

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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

Email Address: _____

RECEIVED

16 MAY 17 PM 4:05

SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**FLORIDA PROFIT/NON PROFIT CORPORATION
LAB365 CORP**

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

16 MAY 17 AM 10:15

SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

05/18/16

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)**H16000121958****ARTICLE I NAME:** The name of the corporation is:LAB 365 Corp**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

6363 SW 114 AVEMiami FL 33173**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Donny Garcia (VP)Anthony Lopez (P)FILED
16 MAY 17 AM 10:15SECRETARY OF STATE
DIVISION OF CORPORATIONS**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

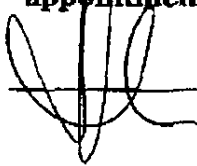
The name and Florida street address (PO Box not acceptable) of the registered agent is:

Danny Garcia6363 SW 114 AVEMiami FL 33172**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Danny Garcia6363 SW 114 AVEMiami FL 33172**H16000121958**

H16000121958

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

5/17/16
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

5/17/16
Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 MAY 17 AM 10:15

H16000121958