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.

(((H16000159155 3)))



H160001591553ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

		The state of the s	
To:	•		
	Division of Cor	roorations	
	Fax Number	: (850)617-6381	
From:			
	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.	
	Account Number		
	Phone	: (305)552-5973	•
	Fax Number	: (305)675-5944 ≥⊴ =	
		- (303)0/3=33#	
		ddress for this business entity to be used for future	
**		day and the area and areas and all the area for the area.	77
	annual report	mailings. Enter only one email address please.***** 😂	
			1
	Email Address:		П
	·		
	,	S. C.	
	FLORIDA	PROFIT/NON PROFIT CORPORATION \mathbb{R}^{m} \mathbb{R}^{m}	

FLORIDA PROFIT/NON PROFIT CORPORATION DANJO.SERVICE CORP

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

Electronic Filing Menu

Corporate Filing Menu

Help

1,

1111

PAGE 02/03

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

16 JUN 30 AM 9: 52

SECRETARY OF STATE TALLAHASSEE FLORIDA

	ARTICLET NAME	E: The name of the corporation	ais: TALLAHASSEE
I	WITO. SECVICE	CORP.	
	ARTICLE II	PRINCIPAL OFFICE:	
	The principal street	address and mailing address i	- 3:
_	6060 NW 18	6 st apt / 300	<u> </u>
	thaleah	ZZ 33015	· · · · · · · · · · · · · · · · · · ·
			100
ARTICL	E III SHARES: The nur	mber of shares of stock is:	100
	RTICLE IV INTIAL	DIRECTORS AND/OR OF	FICERS:
P)	FORBE Feli	x Tole do	
<u> </u>			
			<u>, , , , , , , , , , , , , , , , , , , </u>
ARTI	LEV INITIAL REGIS	TERED AGENT AND STR	ERT ADDRESS:
The nan	e and Florida street address	(PO Box not acceptable) of the	registered agent is:
	Jorge te	JIX OLED	0
(0060 NM	186 ST AC	<u>+ 305</u>
	HIALEAH F	FL 33015	
	·		
ARTIC		OR: The name and address of	the Incorporator is:
	1080E +EL	1X DEPL	<u></u>
		1501 - 0 =	レコベニ
<u></u>	000 NW_	186 ST Ap	1305

05/30/2016 14:29 3052201440

FILED 16000159155

SECRETARY OF STATE TALLAHASSEE FLORIDA

Required Signatures:

Having been named as registered agent to accept a corporation at the place designated in this certific appointment as registered agent and a	ate, I am familiar with and accept the
Registered Agent	Date
submit this document and affirm that the facts state he false information submitted in a document to the hird degree felony as provided for in s.817.155, F.S	e Department of State constitutes a