08/15/2016 16:0 [illegible] LAZARUS PAGE 01/03

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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.
Account Number : I20000000019
Phone : (305)552-5973
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16 AUG 15 AM 9:37 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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FLORIDA PROFIT/NON PROFIT CORPORATION
LARROUDE'S DISTRIBUTOR CORP

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

Electronic Filing Menu Corporate Filing Menu Help

ARTICLES OF INCORPORATION H16000201560

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

ARTICLE I / NAME: The name of the corporation is:

Larroude's Distributor Corp

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

11415 SW 59 Terrace Miami FL 33173

100

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

ARTICLE IV / INITIAL DIRECTORS AND/OR OFFICERS:

Humberto Larroude (P)

15 AUG 15 AM 9:31

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Humberto Larroude
11415 SW 59 Terrace
Miami FL 33173

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

Humberto Larroude
11415 SW 59 Terrace
Miami FL 33173

LAZARUS

08/15/2016 16:04 3052201440

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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

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.

Incorporator _____ Date _____

16 AUG 15 AM 9:37

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