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Division of Corporations

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Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

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## FLORIDA PROFIT/NON PROFIT CORPORATION ALAIN EL CLARIVIDENTE, INC.

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

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## **ARTICLES OF INCORPORATION**

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

ARTICLE I NAME

The name of the corporation shall be:

ALAIN EL CLARIVIDENTE, INC.

ARTICLE II PRINCIPAL OFFICE

Principal Street Address:

8910 NW 99TH CT

DORAL, FL. 33178

Mailing Address if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV

The number of shares of stock is:

100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

**ALAIN PUPO-PRESIDENT** 

Address:

8910 NW 99TH CT

**DORAL, FL. 33178** 

Name and Title:

Address:

ARTICLE VI REGISTERED AGENT

The name and Florida Street address (P.O. Box NOT acceptable of the registered agent is:

Name:

**ALAIN PUPO** 

Address:

8910 NW 99TH CT

MIAMI, FL. 33178

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## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

**ALAIN PUPO** 

Address;

8910 NW 99TH CT

DORAL, FL. 33178

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

Required Signature/Registered Agent

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

Date