Division of Corporations Electronic Filing Cover Sheet

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(((H16000308583 3)))



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To:

Division of Corporations

Fax Number

Email Address:_

: (850)617-6381

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone

: (305)552-5973

Fax Number : (305)675-5944

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

FLORIDA PROFIT/NON PROFIT CORPORATION **OSLI CORPORATION**

Certificate of Status	0
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Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

in compliance with Chapter 607 (Profit)
EFFECTIVE- 1/1/17
ARTICLE I NAME: The name of the corporation is:
Osli Corporation
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
Mrani, Florida 33196
ARTICLE III SHARES: The number of shares of stock is: 100
ARTICLE IV INITIAL DIRECTORS AND COROFFICERS:
Ligia Vasques de Panes (P)
The state of the s
PEC _
SSEC A
RAI
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
LIGIO VUBQUEZ DE VAINES
917162 SW 92 ST'
Miami FL 33196
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
LIGIO VUSQUEZ DE VANES
U 17162 SW 92 ST'
Miami FL 33196

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FILED

2016 DEC 16 AMITY 46000300583

SECRETARY OF STATE ALLAHASSEE, FLORIDA

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 appreciate agent and agree to act in this capacity

Registregiane 12/16/16

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.

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