

P170000/5821

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
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Email Address: \_\_\_\_\_

FLORIDA PROFIT/NON PROFIT CORPORATION  
BIOLAB INTERNATIONAL, INC

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

17 FEB 20 AM 11:25  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

*Handwritten signature and date: 02/21/17*

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**ARTICLES OF INCORPORATION**  
In compliance with Chapter 607 (Profit)

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

BIOLAB International, Inc

**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

P: 8500 W Flagler ST STE A106  
Miami FL 33144

M: 6845 W 3 CT Apt 104F  
Hialeah FL 33014

**ARTICLE III SHARES:** The number of shares of stock is: 100

**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

Orlando Rodriguez (P) (T)  
JULIO A. RODRIGUEZ (VP) (S)

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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:

Orlando RODRIGUEZ  
6845 W 3 CT APT 104F  
Hialeah FL 33014


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

Orlando RODRIGUEZ  
8500 W Flagler ST STE A106  
Miami FL 33144


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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 \_\_\_\_\_

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