

02/27/2017 15:11

30522044

LAZARUS

AG 01/03

P170000017742

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**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.**

(((H17000055145 3)))



H170000551453ABC

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

**To:**

Division of Corporations  
Fax Number : (850)617-6381

**From:**

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

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

Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION  
SF CONSULTING & MANAGEMENT INC.**

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

17 FEB 27 PM 4:45

BUREAU OF CORPORATE  
INFORMATION SERVICESFILED  
2017 FEB 27 AM 10:50  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

V HERRING

FEB 28 2017

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 (Profit)

H17000055145

**ARTICLE I NAME:** The name of the corporation is:SF CONSULTING & MANAGEMENT INC.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

11558 NW 6TH COURTCORAL SPRINGS, FL 33071**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**(P) CLAUDIA FERNANDEZ(VP) ERNESTO FERNANDEZ**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

CLAUDIA FERNANDEZ11558 NW 6TH CT.CORAL SPRINGS FL. 33071**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:CLAUDIA FERNANDEZ11558 NW 6TH CT.CORAL SPRINGS, FL. 33071FILED  
2017 FEB 27 AM 10:50

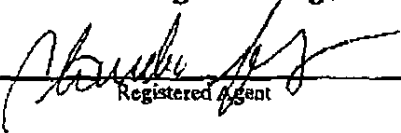
H17000055145

FILED  
H17000055145  
2017 FEB 27 AM 10:50


DEPARTMENT OF STATE  
TALLAHASSEE, 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 as registered agent and agree to act in this capacity

  
\_\_\_\_\_  
Registered Agent      2/23/17  
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      2/23/17  
Date

H17000055145