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Florida Department of State
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**FLORIDA PROFIT/NON PROFIT CORPORATION
LEBRON 4118 EQUIPMENT & SUPPLY CORP.**

Certificate of Status	1
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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

LEBRON 4118 EQUIPMENT & SUPPLY CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

**4118 W VINE STREET
KISSIMMEE, FL 34741**

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,500 Shares at no par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**MANUEL LEBRON
4118 W VINE STREET
KISSIMMEE, FLORIDA 34741**

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KISSIMMEE FLORIDA

Prepared By:

Bruce B. Hubbard

238 W. Jericho Turnpike

Huntington Sta., NY 11746

1-516-935-3940

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ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

MANUEL LEBRON- President/Director
3835 9TH AVENUE, NEW YORK, NY 10034


ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

MANUEL LEBRON
3835 9TH AVENUE, NEW YORK, NY 10034

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

30TH day of MARCH 20 17


MANUEL LEBRON
Signature

11:00
17 APR -7 PM 12:06
FALL ARCADE, N.Y.

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LA WS OF THE ST ATE OF
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE
REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: LEBRON 4118 EQUIPMENT & SUPPLY CORP.

2. The name and address of the registered agent and office is:

MANUEL LEBRON

Name

4118 W VINE STREET

(P.O. Box or Mail Drop Box NOT Acceptable)

KISSIMMEE, FLORIDA 34741

(City / State / Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.


MANUEL LEBRON
SIGNATURE

March 30, 2017
(Date)

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