Division of Corporations Electronic Filing Cover Sheet

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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 futur annual report mailings. Enter only one email address please.

Email	Address:		<u> </u>
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FLORIDA PROFIT/NON PROFIT CORPORATION ESPERANZA'S ALF INC.

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

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Corporate Filing Menu

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

Esperanzais ALF Tnc.
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
miami FL 33173
ARTICLE III SHARES: The number of shares of stock is: 100 AFT ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
Yamileidi Perez (P) 75
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
14336 em 172 st
miami FL 33/77
ARTICLE VI INCORPORATOR; The name and address of the Incorporator is:
<u>Yamileidi</u> <u>Perez</u>
14556 SW 172 ST
Miami FL 33177

H17000120509

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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SEUNL TARY OF STATE
TALL AHASSEE FLORIDA