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 : 120000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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Email	Address:_		<u> </u>		
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FLORIDA PROFIT/NON PROFIT CORPORATION GOT EMMM, INC.

Certificate of Status	0
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Corporate Filing Menu

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ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:					
GAOT EMMH, Inc.					
ARTICLE II PRINCIPAL OFFICE					
The principal street address and mailling address is: 46/3 Park Breeze Court Orlando, 72-32808					
ARTICLE III SHARES: The number of shares of stock is:					
ARTICLE IV INVIIAL DERECTORS AND OR OFFICERS:					
Amanda Lourdes Rivera (P)					
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street and ress (PO Box not acceptable) of the registered agent is: ACCORDES RIVERO					
4613 Park Breeze C+					
Orlando, FL 32808					
ARTICLEVI INCORPORATOR: The name and address of the Incorporator is: ANALYCIA LOUICES Rivers 465 AVE Breeze CF					
12 da de 17 22 2002					

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Required Signatures:

Having been named as registered agent to a corporation at the place designated in this cappointment as registered agent	ertificate, I am familiar with and accept the
Registered Agent	Date
I submit this document and affirm that the fo the false information submitted in a docume third degree felony as provided for in s. 817.19 Incomment	nt to the Department of State constitutes a

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more as a secondary