

P17000051121
Florida Department of State
Division of Corporations
Electronic Filing Center 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.

(((H17000158367 3)))



H170001583673ABC5

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 : I2000000019
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: _____

RECEIVED
17 JUN 13 PM 4: 52
DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

FLORIDA PROFIT/NON PROFIT CORPORATION
LOGISBOX.ORL.CORP

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

FILED
17 JUN 13 AM 8: 48
SECRETARY OF STATE
ALLAHUSSEIN FLORES

H17000158367

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

Loisbox Opt. Corp.

SECRETARY OF STATE
ALLAHASSEE, FLORIDA

17 JUN 13 AM 8:48

FILED

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

8340 NW 66th Ave

Miami FL 33166

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

100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

JEISSON ARNALDO DELGADO ANDRADE

DAJIELA SARAH AVILA MARTINEZ

(P)
(VP)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Andres Carreno Casanas

8340 NW 66th Ave

Miami FL 33166

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

ANDRES CARRENO CASANAS

8340 NW 66th Ave

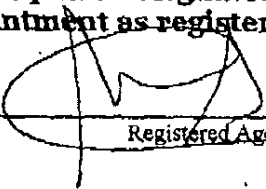
Miami FL 33166

H07000158367

H17000158367

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

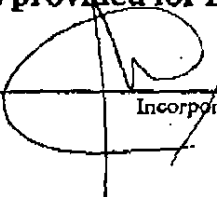


Registered Agent

06/13/2017

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

06/13/2017

Date

H17000158367