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 : I200000000019 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.

FLORIDA PROFIT/NON PROFIT CORPORATION GOD FORCE ONE CORP

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Page Count	03
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Corporate Filing Monu

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ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

EFFECTIVE DATE: 1/1/18

NAME: The name of the	he corporation is:
GOD FORCE ONE	CORP
ARTICLE IL PRINCIPALO	FFICE:
The principal street address and maili	:
<u>8440 SW 35</u>	Terr
Miami FL 3:	3155
ARTICLE III SHARES: The number of shares of s	tock is:
ARTICLE IV INITIAL DIRECTORS AT	ND/OR OFFICERS:
RENE JOSE ESPINO	OSA (P)
	14
ARTICLE V INITIAL REGISTERED AGENT A	ND STREET ADDRESS:
The name and Florida street address (PO Box not accepta	ble) of the registered agent is:
Kene Jose Esp	rinosa
-8990 SW 35	TERR
Miami FL 331	55
ARTICLE VI INCORPORATOR: The name and or	
Rene JOSE ESDI	incorporator is:
8440 SW ZE T	0rr
Miami FL 32	155

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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

Régistered Agent 12/13/17

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.

orporator <u>12/13/17</u>