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(Requestor's Name)	
(Address)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
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CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

1	bervices Inc	(DOCUMENT #)	
2. (CORPORATE NAME	(De	OCUMENT #)	
3. (CORPORATE NAME	(0)	OCUMENT #)	
[] Walk-In	Pick up time: M Certified Copy	Certificate Of Status	
New Filings	Amendments	Other Filings	
Y Profit	Amendments	Annual Report	
Non-Profit	Resignation	Fictitious Name	
Limited Liability	Dissolution/Withdrawal	Apostille:	
Other:	Other:		
		Other:	
		Dec 18 4	
Examiners Initials		8	
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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

TCLE II <u>PRI</u>	SCIPAL OFFICE Principal <u>street</u> address	Mailing addre	ess, if different is:
84 STREET APT	: 4		
MI BEACH, FL			
FICLE III PUR purpose for which	POSE the corporation is organized is: ANY 2	AND ALL LAWFUL BUSINESS	
			
TICLE VINT	of stock is:	<u>s</u>	DEC 18
number of shares FICLE VINII Name and T	of stock is: **IAL OFFICERS AND/OR DIRECTOR** IUAN F. UPEGUI (P) 750 SA STREET APT: 4	<u>S</u> Name and Title:	DEC 18
number of shares	of stock is: **IAL OFFICERS AND/OR DIRECTOR** IUAN F. UPEGUI (P) 750 SA STREET APT: 4	<u>s</u>	DEC 18 F
number of shares FICLE V INIT Name and T Address	of stock is:	<u>S</u> Name and Title: Address:	18 11 81
number of shares FICLE V INIT Name and T Address	of stock is: TAL OFFICERS AND/OR DIRECTOR JUAN F. UPEGUI (P) 750 84 STREET APT: 4 MIAMI BEACH, FL 33141	S Name and Title: Address: Name and Title: Address:	DEC 18 11 1 5 J
number of shares FICLE V INIT Name and T Address Name and Ti	TAL OFFICERS AND/OR DIRECTOR JUAN F. UPEGUI (P) 750 84 STREET APT: 4 MIAMI BEACH, FL 33141	S Name and Title: Name and Title: Address:	DEC 18 11 1: 50
number of shares FICLE V INTI Name and T Address Name and Ti Address	TAL OFFICERS AND/OR DIRECTOR JUAN F. UPEGUI (P) 750 84 STREET APT: 4 MIAMI BEACH, FL 33141	S Name and Title: Address: Name and Title: Address:	05C18 HH 1:50

Name a	nd Title:	Name and Title:	
Addres	ss	Address:	
	REGISTERED AGENT Florida street address (P.O. Box NOT acceptab	ele) of the registered agent is:	
Name:	JUAN F. UPEGUI		. 5
Address:	750 84 STREET APT: 4		W DEC
· -	MIAMI BEACH, FL 33141	<u></u>	
			-8 -8
<u>ARTICLE VII</u>	INCORPORATOR		- H ₂
The name and :	address of the Incorporator is:		: :: :::
Name:	JUAN F. UPEGUI		<u>−</u> ' <i>≻</i> '
Address:	750 84 STREET APT: 4		
	MIAMI BEACH, FL 33141		
Effective date, i	<i>EFFECTIVE DATE:</i> if other than the date of filing: date is listed, the date must be specific and c	. (OPTION annot be more than five day	AL) 's prior or 90 days after the
	te inserted in this block does not meet the applic effective date on the Department of State's reco		ents, this date will not be listed as
Having been no this certificate,	umed as registered agent to accept service of pr I and familiar with and accept the appointment	rocess for the above stated cor as registered agent and agree	rporation at the place designated in to act in this capacity
	Lewell Single		12/14/2018
J Y	Required Signature/Registered Agen		Date
	ocument and affirm that the facts stated hereit e Department offstate constitutes a third degree		
	in Lunte	· · · · · ·	12/14/2018
\	uired Signarure/Incorporator		Date
0	U		