## Electronic Filing Cover

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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 future annual report mailings. Enter only one email address please. \*\*

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## FLORIDA PROFIT/NON PROFIT CORPORATION **G & H MULTISERVICES INC**

Certificate of Status	0			
Certified Copy	1			
Page Count	03			
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Electronic Filing Menu

Corporate Filing Menu

Help

## ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

<b>ARTICLE 1</b> NAME: The name of the corporation is:
GDH MUITISERVICES INC
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
13701 SW 665+ Apt 108 HIMI FL 33183
ARTICLE III SHARES: The number of shares of stock is: 106
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
HERSELD RAFAEL PUPO (P)  GISEL RICARDO (VP)
GISEL RICARDS (VP)
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
_ Herseld Rafgel Fire
10 10 10 10 10 10 10 10 10 10 10 10 10 1
13701 SW GUST APT 108
Miami FL 33183
Miami FL 33183
Miami FL 33183  ARTICLEVI INCORPORATOR: The name and address of the Incorporator is:
Miami FL 33183

## Required Signatures:

401 Por action a	named as registered agent to accept ser t the place designated in this certificate pointment as registered agent and agre	e I am familian with and
	Registered Agent	Date
are renor minor in	cument and affirm that the facts stated ation submitted in a document to the long as provided for in s.817.155, F.S.	l herein are true. I am aware that Department of State constitutes a
	Incorporator	Date