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FLORIDA PROFIT/NON PROFIT CORPORATION CLAUDIA SUPPLIES CORP

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corpora	tion shall be: CLAUDIA SUPPLIES COR	Р					
<u>ARTICLEJI PRINC</u>	<u>IPAL OFFICE</u> Principal <u>street</u> address		Mailing address, if different is:				
J3864 SW 273RD TER		692 W 2	692 W 29TH ST STE 9 HIALEAH, FL 33012				
HOMESTEAD, FL 330	HIALEA						
ARTICLE III PURPO The purpose for which t	<u>SUPPLIES</u> he corporation is organized is:	OF MERCHAND	ISE	•	-		
ARTICLE IV SHARI The number of shares of					1 <u>1</u> 1.		
	L OFFICERS AND/OR DIRECTORS HECTOR BRITO CAPOTE	Name and Title			•		
	13864 SW 273RD TER	_ Nume and Title: _ Address:					
Address	HOMESTEAD, PL 33032	, Address.			· ·		
	PRESIDENT (50 SHARES)	-					
Name and Title	ODELKIS MESA SANTANA	Name and Title:		•			
Address	13864 SW 273RD TER	_ Address:	·				
	HOMESTEAD, FL 33032						
	VICE-PRESIDENT (50 SHARES)			<u>.</u>			
Name and Title:		Name and Title:			 		
Address		Address:	······································		<u> </u>	_	
		. .				—	

Name	and Title:	Name and Title:	
Addre	F55	Address:	
ARTICLE VI	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable) o	DE PERINTERE A DOME I	
Name;	HECTOR BRITO CAPOTE	Togiscored agent ix.	
Address:	13864 SW 273RD TER		
	HOMESTEAD, FL 33032		
<u>ARTICLE VII</u>	INCORPORATOR		
The name and a	ddress of the Incorporator is:	· · · · · · · · · · · · · · · · · · ·	
Name:	HECTOR BRITO CAPOTE		
Address:	13864 SW 273RD TER		
	HOMESTEAD, FL 33032		
Effective date, if	EFFECTIVE DATE: Other than the date of filing: Late is listed, the date must be specific and cannot	. (OPTIONAL) more than five days prior or 90 days after the	<i>€</i> *}
Note: If the date the document's ef	inserted in this block does not meet the applicable st ffective date on the Department of State's records.	story filling requirements, this date will not be list	ted as
Yaving heen nam his certificate, I a	ned as registered agent to accept service of process for familiar with and accept the appointment as regis.	the above stated corporation of the place design red agent and agree to act in this capacity	ated in
	2	JANUARY.26, 2018	
10	Required Signature/Registered Agent	Date	
SHOTH THIS HOCK	ment and affirm that the facts stated herein are tri epirtment of State constitutes a third degree felony of	I am aware that the false information submitte provided for in \$.817.155, F.S.	id by a
		JANUARY 26, 2018	
7	Signature/Incorporator	Date	