Division of Corporations Electronic Filing Cover Sheet

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(((H180000427143)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019

: (305)552-5973

Phone Fax Number

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Email	Address:	

FLORIDA PROFIT/NON PROFIT CORPORATION IAP COMMUNITY SERVICES, INC

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:		
IAP Community Services, Ive		
ARTICLE II PRINCIPAL OFFICE:		
The principal street address and mailing address is:		
5301 Sw 7704 OT Apt 20461 Miani fl 3315	5	
ARTICLE III SHARES: The number of shares of stock is: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:		
Ivonne Acosta Preheco (P)		
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	ည်	
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:		
The name and Florida street address (PO Box not acceptable) of the registered agent is:		
Ivonne Acosta Pacheco		
5301 SW 77Th CTAPT 204 G		
Miami FL 33155		
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:		
Ivonne Acosta Pacheco		
5301 SW 77 MAPT 2019		
Mic. 6/ 33/55		

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Required Signatures:

corporation at the place	registered agent to accept sedesignated in this certificates as registered agent and ag	ate. I am familiar with ar	nd accent the
	Alesas	•	
	Registered Agent	Date	
	•		
the false information sub	nd affirm that the facts stat mitted in a document to the ovided for in s.817.155, F.S.	ed herein are true, I am e Department of State co	aware that enstitutes a
		Date	