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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 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.

Email	Address:		

FLORIDA	PROFIT/NON	PROFIT	CORPORATION
	VIA DI	A7 INC	

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Corporate Filing Menu

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AH 9:

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

ARTICLE II PRINCIPAL OFFICE:	TATS
The principal street address and mailing address is:	LCS ECS
2825 NW 11 th BL	HAS ETA
miam, EC 33125	
	FLO
RTICLE III SHARES: The number of shares of stock is:	DRIDA
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	
Adrian Siaz Martinez (P)	
Viviana Espinosa (19)	 -
	
	
	
AND STREET ADDRE	 PSS:
e name and Florida street address (PO Box not acceptable) of the registered as	 SS: gent is:
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS (PO Box not acceptable) of the registered agent Adrian Digz Marti	ent is:
e name and Florida street address (PO Box not acceptable) of the registered as	ESS: gent is:
e name and Florida street address (PO Box not acceptable) of the registered ag	ent is:
e name and Florida street address (PO Box not acceptable) of the registered age Adrian Diaz Martin 2825 NW 11Th ST Miami FL 33125	gent is: LNCZ —
e name and Florida street address (PO Box not acceptable) of the registered ag Adrian Diaz Marti 2825 NW 11Th ST Miami FL 33125 RTICLE VI INCORPORATOR: The name and address of the Incorporat	gent is: LNCZ —
e name and Florida street address (PO Box not acceptable) of the registered ag Adrian Diaz Marti 2825 NW 11Th ST Miami FL 33125 RICLEVI INCORPORATOR: The name and address of the Incorporat Adrian Diaz Martin	gent is: LNCZ —
e name and Florida street address (PO Box not acceptable) of the registered age Adrian Digz Martin 2825 NW 11Th ST Miami FL 33125 RICLE VI INCORPORATOR: The name and address of the Incorporate Adrian	gent is: LNCZ — tor is:

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

degistered Agent 02

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.847.155, F.S.

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