## Division of Corporations **Electronic Filing Cover Sheet**

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To:				SET
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	Fax Number	(850)617-6381		FS
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	Account Name	: LAZARUS CORPORAT	E FILING SERVICE, I	NC.
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	Phone			
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⊧Enter 1	the email address	for this business	entity to be used	for future

## FLORIDA PROFIT/NON PROFIT CORPORATION ATTRISIA CORP

Certificate of Status	0
Certified Copy	I.
Page Count	03
Estimated Charge	\$78.75

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## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:		
Attrisia Corp		
ARTICLE II PRINCIPAL OFFICE:		
The principal street address and mailing address is:  100 BAYVIEW Dr. Apt 1004  Sunny ISIES BEACH, FL PRINCIPLE  33100	18 MAR	•-
ARTICLE III SHARES: The number of shares of stock is:	-2	F
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	PH 2: 52	•
Paula Rojas (P)		
DANIEL GARCIA (T)		
MARIA J GARCIA (5)		
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:  The name and Florida street address (PO Box not acceptable) of the registered agent is:  PAULA ROTAS		
100 BAYVIEW Dr. Apt 1604		
Sunny Isles Beach, FL		
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:		
- PAULA ROJAS		
100 BAYVIEW Dr. Apt 1604		
Sunny Isles Beach, FL 33160		

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## 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

Registered Agent Date

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.817.155, F.S.

Incorporator Date