

05/21/2018

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LAZARUS CORPORATE

PAGE 01/03

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Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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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)575-5944

****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
YUSNIEL DELIVERY CORP**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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MAY 22 2018

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:YUSNIEL DELIVERY CORP**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

1200 SW 130 AVE MIAMI FL 33184**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**YUSNIEL GONZALEZ GODOY
(PRESIDENT)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

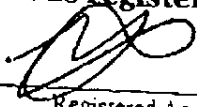
The name and Florida street address (PO Box not acceptable) of the registered agent is:

YUSNIEL GONZALEZ GODOY
1200 SW 130 AVE
MIAMI FL 33184**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:YUSNIEL GONZALEZ GODOY
1200 SW 130 AVE
MIAMI FL 33184

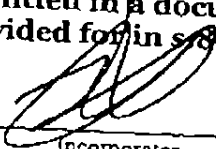
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Required Signatures:

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_____
DateFILED
TALLAHASSEE, FLORIDA

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