P18000058949

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000196832 3)))

H18000196832 3ABCS

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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)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:_____

FILED
2018 JUL -5 AM 9:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION

T Y T ENTERPRISE CORP

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

RECEIVED
2018 JUL -5 PM 4:16
... CORPORATIONS
... COMMERCIAL
... SERVICES

Electronic Filing Menu Corporate Filing Menu Help

N CULLIGAN

JUL 6 2018

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

FILED
2018 JUL -5 AM 9:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME: The name of the corporation is:

TY TENTerprise Corp.

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

2520 NW 84 AVE #102
Doral, FL. 33122

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

(P) Diogenes Antonio Toribio Toribio

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Diogenes Antonio TORIBIO TORIBIO
2520 NW 84 ave #102
Doral FL 33122

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Diogenes Antonio TORIBIO TORIBIO
2520 NW 84 Ave #102
Doral FL 33122

H18000196832

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 7/5/18
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 7/5/18
Date

FILED
2018 JUL -5 AM 9:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B18000196832