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 : 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 XTREME FINANCE CORP

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Certificate of Status	0
Certified Copy	1
Page Count	03
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Corporate Filing Menu

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 (Profit)

2010 JUL -5 AM 9: 42

FILED

SECRETARY OF STATE ARTICLET

The name of the co	rporatibility AHASSEE. FLORI
- Xtreme Finance Corp	,
ARTICLE II PRINCIPAL OFFI	
The principal street address and mailing a	ddress is:
1231 SW 124th ct	onit E
mioni, F1 33 184	
	· · · · · · · · · · · · · · · · · · ·
ARTICLE III SHARES: The number of shares of stock	is: <u>100</u>
A Victor of the	
ARTICLE IV INITIAL DIRECTORS AND	OR OFFICERS:
-Aryam Raiz (P)	
	* * *
ARTICLE V INITIAL REGISTERED AGENT AN	D STREET ADDRESS:
The name and Florida street address (PO Box not acceptable	
Arjam Ruiz	
1231 SW 124Th	C+ Unit F
Miami Fl	231911
	70104
ARTICLE VI INCORPORATOR: The name and add	ress of the Impormorator is:
Arvam Ruiz	rod of the mediportion is.
1231 SW 124Th	CT Unit E
Miami FL	33184
	<u> </u>
•	H1800019670

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

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

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SECRETARY OF STATE