

# P18000074856

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.

((H18000258278 3)))



H180002582783ABC8

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 : 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  
ADLS CANVAS 3609 CORP

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

FILED  
2018 SEP -4 AM 10:42  
SECRETARY OF STATE  
TALLAHASSEE, FL

2018 SEP -4 PM 4:33  
RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL

Electronic Filing Menu

Corporate Filing Menu

Help

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 (Profit)

**ARTICLE I NAME:** The name of the corporation is:ADLS CANVAS 3609 Corp**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

1390 BRICKELL AVE #104  
Miami FL 33131**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**BRYAN ROJAS (P)  
DNA IMBRIA DE LOS SANTOS VP**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

Bryan Rojas  
1390 Brickell Ave #104  
Miami FL 33131**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Bryan Rojas  
1390 Brickell Ave #104  
Miami FL 33131SECRETARY OF STATE  
TALLAHASSEE, FL

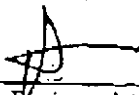
2018 SEP -4 AM 10:42

FILED

H18000253278

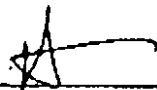
**Required Signatures:**

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

09-04-18  
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

09-04-18  
Date

**FILED**  
2018 SEP -4 AM 10:42  
SECRETARY OF STATE  
TALLAHASSEE, FL

H18000258278