oricl Department of State A Computation of State Electronic stang Cover Sheet

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To:		
	Division of Cor	porations
	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
Ent		ress for this business entity to be used for future ilings. Enter only one email address please.
	Email Address:	

FLORIDA PROFIT/NON PROFIT CORPORATION LHL MAINTENANCE INC

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

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CRETARY OF STATE
ALLAHASSEE, FL

Electronic Filing Menu

Corporate Filing Menu

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ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:
LHL Maintenance INC
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
Cal Taniani Bludo
Miani, FC 33144
ARTICLE III SHARES: The number of shares of stock is:
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
Trabella Victores
SEC.
TO SECOND
TA U
Ser A
9: Ou
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS!
The name and Florida street address (PO Box not acceptable) of the registered agent is:
IZABELLA VICTORES
621 TAMIAMI BUIL.
MIAMI FL 33144
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
ARTICLEVI INCORPORATOR: The name and address of the Incorporator is: IZABELLA VICTORES OLIVA
621 TAMIAMI BLVD.
MIAMI FL 33144

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

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 proyided for in s.817.155, F.S.

Incorporator

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