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.

(((H18000290577 3)))



H180002905773ABC8

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 CREATION4LIFE, INC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

SECREJARY OF STATE
TALLAHASSEF, FI

To whom it may concern:

## Florida Department of State

**Attention: New Filings Section** 

To whom it may concern.	
This is to advise that the owners of	
(reation 4/ ife.	Inc

of Document # P17 00078634

are the same owners of the attached articles. We have dissolved the company and have no intention of reopening it.

Thank you for your help in this matter.

Thanks,

Carlos Alfredo Delacadem

2018 OCT -5 AM 10: 33
SECRETARY OF STATE

ARTICLES OF INCORPORATION
In compliance with Chapter 607 (Profit)

TAX ID; 81-3334497

ARTICLE 1 NAME: The name of the corporation is:	
CREATION4LIFE, INC	
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:  Uni  11870 HIALEAH GARDENS BIND 1298  HIALEAH GARDONS, FL. 33018	T -11
ARTICLE III SHARES: The number of shares of stock is: 100	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	
CARLOS ALFREDO DE LA CABENA  (PRESIDENT)  SECRETARIO  ARTICLEV INITIAL REGISTERED AGENT AND STREET ADDRESS, TAIL  The name and Florida street address (PO Box not acceptable) of the registered agent is:  (ARLOS ALFREDO DE LA CABENA  LIBTO HIALEAH GARDENS BLVD  INITIZAB-III HIALEAH GARDENS, FL  33018  ARTICLEVI INCORPORATOR: The name and address of the Incorporator is:  (ARLOS ALFREDO DE LA CADENA	
1010 HIAKAH GARDENS BLUX UNITEDOR	
HIALEAH GARDENS FL 3308	

## 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 9-29-17
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 \$/\$17.155, F.S.

Incorporator

9-Z9-17 Date

2018 OCT -5 AM 10: 33
SECRETARY OF STATE
SECRETARY OF STATE