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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 PA&JR CORP.

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

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## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:
AUIR Conp.
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
13766 SW 54 IN : MIAMI F1 33175.
ARTICLE III SHARES: The number of shares of stock is: \\C
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
Tase R Rockeley 28.7. (P)
JOSER Rodniquez (P) Pedro O Alonso (VP)

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

| Jose R Rodriguez | 13766 Sw 54 CN | Miami FL 33175

ARTICLE VI	INCORPORA	COR: The name and	l address of the Inco	orporator is
Jos	e R	Rodrigs	Jez_	<del>_</del>
	13766	<u>_sw_5</u>	<u>4 LN</u>	
	liami_	<u>FL</u>	30	1 12

## 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

25/10/20/8

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 provided for in s.817.155, F.S.

Incorporator

Date