Division of Corporations
Electronic Filing Cover Sheet

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To:		The second secon	
10.	Division of Co	annanati	
	Fax Number	: (85 0)617-6381	
From:			
	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.	
	Account Number	: 120000000019	
	Phone		
	Fax Number		
Ent	er the email add annual report ma Email Address:	ress for this business entity to be used for future ilings. Enter only one email address please.	

ESCORPIO REMODELING SERVICES, CORP

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

N. SAMS JAN 1 1 2019

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

AMI, FL 33183 TICLE III PURPOSE: purpose for which the corporation is organized is: REMODELING SERVICES				
TICLE III PURPOSE 2 purpose for which the corporation is organized is: PULLE IV SHARES DIAMETER OF Startes of stock is: 100 VICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Address PRESIDENT Address: 7114 SW 135TH CT 7114 SW 1		at is:		
PRESIDENT Address PRESIDENT Address Name and Title: MIAMI, FL 33183 REMODELING SERVICES Address Address Name and Title: Marne and Title: Name and Title:	183	MIAMI, FL 33183		
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MIAMI, FL 33183 MIAM Name and Title: Address				
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Address	 			
Manager & Title				
Name and Title: Name and Title:		-		
Address: Address:		 -		
				

• . .

Name and Title:		Name and Title:		
Adei	intss	Address:		
ARTICI E VI	<u>REGISTERED AGENT</u>			
The name and	Florida street address (P.O. Box NOT acc	entable) of the registered agent in		
Name:	ROBERTO LUGO ALONSO	opunity of the registered agent is:		•
Address:	7114 SW 135TH CT		· 	13
	MIAMI, FL 33183		٠	[
ARTICLE VII	INCORPORATOR			18
The name and	address of the Incorporator is:			= :
Name:	ROBERTO LUGO ALONSO		- -	(၃ Ch
Address:	7114 SW 135TH CT			
	MIAMI, FL 33183	~		
Effective date, i	EFFECTIVE DATE; fother than the date of filing: date is listed, the date must be specific an	. (OPTIONAL) d cannot be more than five days pric	r or 90 days afte	er the
Note: If the date the document's a	e inserted in this block does not meet the ap effective date on the Department of State's r	plicable statutory filing requirements, tecords.	his date will not b	se listed as
Having been nai	med as registered agent to accept service of our familiar with and accept the appointmen	process for the above stated corporati nt as registered agent and agree to act i	on at the place di in this capacity	esignated ir
XIXX	MAY		01/14/2019	
	Required Signature/Registered Age		Date	
documely this due	ument and affirm that the facts stated here Department of State constitutes a third degree	itn are true. I am aware that the false Se felony as provided for in s.817.155, i	Information sub R.S.	mitted la a
	red Signature/Incorporator	91>	01/14/2019	
· · · · · · · · · · · · · · · · · · ·	or organization botator		Date	