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.

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To:		
	Division of Co	
	Fax Number	: (850)617-6381
From:		
	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.
	Account Number	: 120000000019
	Phone	: (305)552-5973
	Fax Number	: (385)675-5944
		- (200)
Ente	er the email addr annual report ma:	ess for this business entity to be used for future llings. Enter only one email address please.
	Emmail Address:	

FLORIDA PROFIT/NON PROFIT CORPORATION PEREZGALAN CHILDREN SERVICES CORP

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\$78.75	

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE J NAME: The name of the corporation is:
Pérez Galán Children Services Corp
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is: 12.63 SW 10 LN MIQMI-F(33184
ARTICLE III SHARES: The number of shares of stock is: 100
ANTICLEIV INITIAL DIRECTORS AND/OR OFFICERS: AND Javier Perez Perez (P)
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is: ANGU JOVIET PETEZ 12203 SW 10 LN MIAMI FL 33184
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is: Andy Javier Perez Perez 12263 SW 10 LN Miami FL 33184

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 provided for in \$ 817.155, F.S.

Date