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To:		
Division of Cor	porations	
	: (850)617-6381	
		<i>57.</i>
From:		r-;
Account Name	: LAZARUS CORPORATE FILING SEF	WICE, INC. 😓 🗒
Account Number		至6
Phone	: (305)552-5973	
Fax Mumber	: (305)675-5944	
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**Enter the email addr	ess for this business entity t	o be used for future
annual report mai	lings. Enter only one email a	dress nlease **
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FLORIDA PROFIT/NON PROFIT CORPORATION BARRETO NURSE SERVICES INC

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

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

* Barreto	Norse Services INC.	
	ARTICLE II PRINCIPAL OFFICE:	
	The principal street address and mailing address is:	
	5910 5W 109ave	•
	5910 5W 109ave Mani FL 33173	_ _
ARTICLE I	III SHARES: The number of shares of stock is:	2
ARI	TICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	
		<u> </u>
	eisy Barreto (P)	
· · · · · · · · · · · · · · · · · · ·		
		<u>.</u>
		;
APTICLE S	V INTERNATIONAL TO A STATE OF THE STATE OF T	
The name and	V INITIAL REGISTERED AGENT AND STREET ADDRE	<u> </u>
_ De	d Florida street address (PO Box not acceptable) of the registered ag	{ent is:
	10 5W 109 Ave	 -
	10MI FC 33173	
A Difference on a way		
ARTICLE VI	The name and address of the incorporation	tor is:
	Dersy BARRETO	
59.	10 5W 109 SUC -	
Hi	ROMI FC 33173	_

3052201440

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

submit this document and affirm that the facts stated herein are true. I am aware that he false information submitted in a document to the Department of State constitutes a hird degree felony as provided for in s.817.155, F.S.