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.

**Electronic Filing Cover Sheet** 

(((H19000124159 3)))



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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.\*\*

## FLORIDA PROFIT/NON PROFIT CORPORATION EZ MEALS 2 GO 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:	
EZ HeAls 2 go Inc.	
A DOWN on	
TOTALE:	
The principal street address and mailing address is:	
Homestead FC 33035	
ARTICLE III SHARES: The number of shares of stock is: 100	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	
RAQUEL HERNANDEZ (V.P.) FE 5	
RAWLE 11= ( TRESIDENT.)	
THERMANDEZ TV.P.) ES 5	
PR	<del></del> ;
	=
9	
The name and Florida street all	
Torica siteet address (PO Box not acceptable) of the	
OSUALDO HERNANDEZ	
2018 SE 14 ct	
HOMESTEAD FC 33035	
ARTICLE VI INCORPORATOR, TA	
ine name and address of the Incompany	
2018 SE 14ct	
HUMESTEAD FL 33035	

## 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 proyided for in s.817.155, F.S.

Incorporator

19 APR 15 AH 9: 55