

**P190000036776**

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.**

((H19000147889 3)))



H190001478893ABCE

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

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  
E & Y FINANCE & INVESTMENT INC**

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
19 MAY - 3 AM 8:10  
FILED

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 (Profit)

**ARTICLE I NAME:** The name of the corporation is:E & Y Finance & Investment INC**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

13930 NW 20 AVE OPAUCKA FL 33054**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Yosely mastropa (P)  
Eduardo Cardenas (VP)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

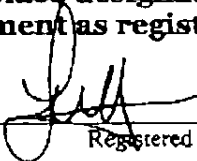
Yosely MASTRAPA  
13930 NW 20 AVE OPAUCKA FL 33054**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Yosely MASTRAPA  
13930 NW 20 AVE OPAUCKA FL 33054SECRETARY  
ALL INFORMATION  
IS UNCLASSIFIED  
DATE 05/03/2019 BY 60322

19 MAY -3 AM 8:10

FILED

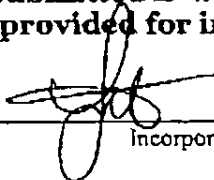
**Required Signatures:**

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

05-03-19  
Date

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

05-03-19  
Date

FILED  
19 MAY -3 AM 8:10  
SECRETARY  
TALLAHASSEE FL 32309