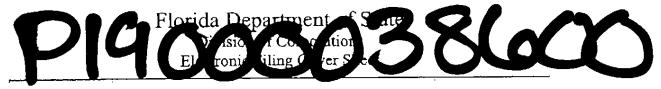
5/9/2019

Division of Corporations



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

<u>ARTICLE II PRIN</u>	Principal <u>street</u> address	Mailing add	ess, if different is:
770 EAST 45 ST			
HIALEAH, FL 33013			
ARTICLE III PURI The purpose for which	POSE the corporation is organized is:	Y AND ALL LAWFUL BUSINESS	
			S HAY
			\$35.7 - 9
ARTICLE IV SHA	RES 100 of stock is:		A A
THE HUMBOUT OF SHALOS	01 340 CK 13	 	, , , , , , , , , , , , , , , , , , ,
	and a developed with land himber	200	0.580 174.55 2. 540 2.5 40 2.5 40
ARTICLE V INT	TAL OFFICERS AND/OR DIRECT MARISLEIDY ACOSTA IMEN	ORS NEZ (P) Name and Tide:	5 6 10A
ARTICLE V INT. Name and Ti Address	tle: MARISLEIDY ACOSTA TIMEN	NEZ (P) Name and Title:	
Name and Ti	MARISLEIDY ACOSTA MMEN T70 EAST 45 ST HIALEAH, FL 33013	NEZ (P) Name and Title:	
Name and Ti	tle: MARISLEIDY ACOSTA JIMER 770 EAST 45 ST	NEZ (P) Name and Title:	
Name and Ti	tle: MARISLEIDY ACOSTA JIMEN 770 EAST 45 ST HIALEAH, FL 33013	NEZ (P) Name and Title:	
Name and Ti	tle: MARISLEIDY ACOSTA JIMEN 770 EAST 45 ST HIALEAH, FL 33013	NEZ (P) Name and Title:Address:	
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Name and Ti Address Name and Tit Address	tle: MARISLEIDY ACOSTA JIMEN 770 EAST 45 ST HIALEAH, FL 33013	NEZ (P) Name and Title: Address: Name and Title: Address: Name and Title:	

Name ar	nd Title:	Name and Title:		
Address		Address:		
ARTICLE VI The name and l	REGISTERED AGENT [lorida street address (P.O. Box NOT acceptable)	of the registered agent is:		
Name:	MARISLEIDY ACOSTA ITMENEZ	_		
Address:	770 EAST 45 ST	_		
	HIALEAH, FL 33013	_		
ARTICLE VII	INCORPORATOR			
The name and	address of the Incorporator is:			
Name:	MARISLETDY ACOSTA JIMENEZ			
Address:	770 EAST 45 ST			
	HIALEAH, FL 33013	_		
Effective date, (If an effective filing.)		. (OPTIONAL) not be more than five days prior or 90 days after the sle statutory filing requirements, this date will not be listed as		
the document's	effective date on the Department of State's record	S.		
Having been n	amed as registered agent to accept service of proc I am familiar with and accept the appointment as	ess for the above stated corporation at the place designated in registered agent and agree to act in this capacity		
	Hickory	5/7/2019		
_	Required Signature/Registered Agent	Date		
I submit this d document to th	locument and affirm that the facts stated herein to the Department of State constitutes a third degree fe	tre true. I am aware that the false information submitted in a lony as provided for in s.817.155, F.S.		
	Harta	5/7/2019		
Rec	quired Signature/Incorporator	Date		