Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 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;	
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FLORIDA PROFIT/NON PROFIT CORPORATION SKYLINE FOREST CORP

Certificate of Status	0
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J. FASON

MAY 1 3 2019 -

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICIES NAME: The name of the corporation is:	
Styline FOREST COPP	
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	
20920 SW 2425T	
Homesterd, Fz 33031	
I STURE, C. JOS	
ARTICLE III SHARES: The number of shares of stock is: 100	
ARTICLE IV INITIAL DIRECTORS AND OR OFFICERS:	
Lazaro Moroi la Procident	
lazano Moreira President lità Gomez Vice President	
Since Fresiden)	
ARTICLE V INHITAL REGISTERED AGENT AND STREET ADDRESS:	
The name and Plorida street address (PO Box not acceptable) of the registered agent is:	
Cazano Kloreira.	
20920 SW 242 ST	
Homestead, Fr. 3303,	
ARTICLEVI INCORPORATOR: The name and address of the Incorporator is:	M
LAZARO MOREIRA	
20920 SW 242 ST FE 5	
Homostond Fl 22021	
TOURDICULT L DOUDL	

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

I submit this document and affirm that the facts stated berein 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 Date