## 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.

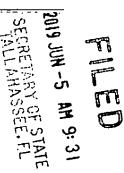
Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

\*\*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 LAVIC ENTERPRISES CORP.

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



## ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

LAVIC Enterprises Corp.	
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:  7524 NW 7200 Hedley 7/33/66	
ARTICLE III SHARES: The number of shares of stock is:	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	
ARTICLEY INITIAL REGISTERED AGENT AND STREET ADDRESS:  The name and Florida street address (PO Box not acceptable) of the registered agent is:  LUCY Sanchez MENDO  7524 NW 72 AUE &	
MEDIEY, FL. 33164	
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:  LUCY SANCHEZ MENDO SE  75 24 NW 72 AUE  MEDIEV, FL. 33166	
MEDLEY, FZ. 33/66	

## 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

06-05-19 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

06-05-19.