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.

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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.

ail Address:		

FLORIDA PROFIT/NON PROFIT CORPORATION SOUTH FLORIDA SENIOR CENTER CORP.

Certificate of Status	0
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Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:
South Ploè de Senior Conter o
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is: 2933 5W 37d AVC
MIGMI FIORES 33129
ARTICLE III SHARES: The number of shares of stock is: //
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS: (100 dig URibe-Orectt Pres.)
Felipe Bassi (VP)
Jeffrey lopez (VP)
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
2933 SW 3 PD AVE
Miami FL 33129
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
2933 SW 3 PD AVE MIAMI EL 33/29
MIAMI E1 33129

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 6 14 19

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.

Tocorporator Date