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Florida Department of State  
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, LLC.  
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FLORIDA PROFIT/NON PROFIT CORPORATION  
HECTOR BROTHER INC

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

2019 JUL 18 PM 2:02

FLORIDA DEPARTMENT OF STATE

19 JUL 18 AM 10:05

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

**ARTICLE I NAME:** The name of the corporation is:

Hector brother inc

**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

515 Grand Canal DR Miami FL 33144

**ARTICLE III SHARES:** The number of shares of stock is: 100

**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

Alexis Rodriguez Suarez (P)

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**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

Alexis Rodriguez Suarez

515 Grand Canal Dr

Miami FL 33144

**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:

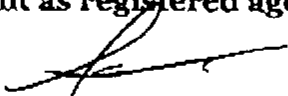
Alexis Rodriguez Suarez

515 Grand Canal Dr

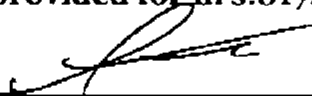
Miami FL 33144

**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**

 <hr/> Registered Agent	7-17-19 <hr/> Date
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**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.**

 <hr/> Incorporator	7-17-19 <hr/> Date
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RECORDED  
19 JUL 18 AM 10:06  
TALLAHASSEE, FL 32309