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 docurrent.

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| To:          | Division of Corporations   |                   | 芸物               |  |
|              | Fax Number : (850)617-6381   |                   | 55.0             |  |
| From:        |  |                   | in a             | عد ب<br>در د                           |
|              | Account Name : LAZARUS CORPORATE FILING SERVI<br>Account Number : I20000000019<br>Phone : (305)552-5973<br>Fax Number : (305)675-5944  | CE, IN:           | . 7              | M 9: 27                                |
|              | Fax Number : (305)675-5944   |                   |                  |  |
| <b>*</b> Fa* |  |                   |                  |  |
| *Enter       | the email address for this business entity to be   | used fo           | r future         |  |
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| em           | the email address for this business entity to be unual report mailings. Enter only one email address mail Address:  FLORIDA PROFIT/NON PROFIT CORPOREDCA HOLDING INC.  Certificate of Status | s please          |                  | <u> </u>                               |

Electronic Filing Menu

Corporate Filing Menu

Elelp

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

| EDCA Holding INC.  |       |
|--|-------|
| ARTICLE II PRINCIPAL OFFICE:   | _     |
| 1239 Mariposa AVE Dyt 14<br>Coral Gables Florida 33146   |       |
| ARTICLE III SHARES: The number of shares of stock is: CO   |       |
| Eduardo Cabrera (P)  |       |
| SECRE AR SECRETARY SECRETA |       |
| ARTICLE V INITIAL REGISTERED AGENT AND STREET A) DRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is:  | O     |
| EDURROO CABRERA  |       |
| CORAL GABLES FL 33144.   | وفاري |
| ARTICLEVI INCORPORATOR: The name and address of the Incorporator is:  EDUARDO CABRERA  1239 MARIPOSA AVE OFT PERS  CORAL GABIES FL 33/XC.  |       |
|  |       |

## 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

01/08/19

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.

Incorporator

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