

08/29/2019 13:3

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LAZARUS CORPORATE

01/03

P19000061476

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, 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: _____

2019 AUG 29 AM 8:40
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

**FLORIDA PROFIT/NON PROFIT CORPORATION
305 MULTIPLE SVC, INC**

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

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Corporate Filing Menu

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N CULLIGAN

AUG 30 2019

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

SECRETARY OF STATE
TALLAHASSEE, FL**ARTICLE I NAME**

The name of the corporation shall be: 305 MULTIPLE SVC, INC

ARTICLE II PRINCIPAL OFFICEPrincipal street address

Mailing address, if different is:

987 SW 37 AVE. APT 1014

987 SW 37 AVE. APT 1014

MIAMI, FL 33135

MIAMI, FL 33135

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: P: OMAR A. RICHANI

Name and Title:

Address

987 SW 37 AVE.

Address:

APT. 1014

MIAMI, FL 33135

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: OMAR A. RICHANI
Address: 987 SW 37 AVE. APT 1014
MIAMI, FL 33135

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: OMAR A. RICHANI
Address: 987 SW 37 AVE. APT 1014
MIAMI, FL 33135

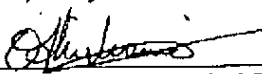
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 08/26/2019 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements this date will not be listed as the document's effective date on the Department of State's records.

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



Required Signature/Registered Agent

08/26/2019

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.



Required Signature/Incorporator

08/26/2019

Date

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TALLAHASSEE, FL

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