

P1900072409

Florida Department of State
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.

(((H19000282915 3)))



H190002829153ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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: _____

FLORIDA PROFIT/NON PROFIT CORPORATION AN21 COMMUNICATION INC

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

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 2019 SEP 20 AM 10:48

FILED

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

SEP 23 2019
K Brumbley

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:ANZI COMMUNICATION INC**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

4250 SW 129 PL Miami FL 33175**ARTICLE III SHARES:** The number of shares of stock is:100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Antuan Capiro (P)2019 SEP 20 AM 10:48
SECRETARY OF
TALLAHASSEE, FLORIDA

FILED

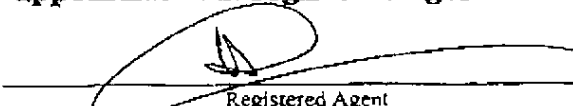
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

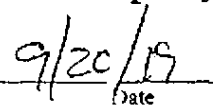
Antuan Capiro
4250 SW 129 PL
Miami FL 33175**ARTICLE VI INCORPORATOR:** The name and address of the incorporator is:Antuan Capiro
4250 SW 129 PL

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

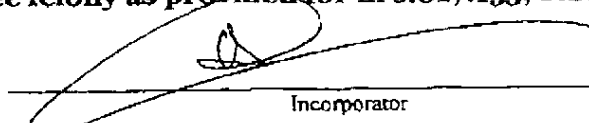


Registered Agent

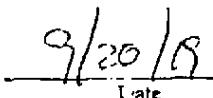


Date

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



Date