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.

(((H19000289610 3)))

ote: DO	NOT hit the REFRESH/RELOAD button on your browser Doing so will generate another cover sheet.	frem this	page.
	,		
To:	Division of Corporations		
	Fax Number : (859)617-6381		
From:			
riom.	Account Name : LAZARUS CORPORATE FILING SERVICE,	INC.	11
	Account Number : I29900000019		7-4
	Phone : (305)552-5973 Fax Number : (305)675-5944		<i>[</i> ∩ <i>]</i>
**Enter an:	the email address for this business entity to be used nual report mailings. Enter only one email address pl	for fut	ure
en:	nual report mailings. Enter only one email address plail Address: FLORIDA PROFIT/NON PROFIT CORPORAT	ease.**	
en:	nual report mailings. Enter only one email address plail Address: FLORIDA PROFIT/NON PROFIT CORPORAT ECO TECH ROOFING CORP.	ease.**	ure S TALI
en:	nual report mailings. Enter only one email address plail Address: FLORIDA PROFIT/NON PROFIT CORPORAT	ion	
en:	nual report mailings. Enter only one email address plail Address: FLORIDA PROFIT/NON PROFIT CORPORAT ECO TECH ROOFING CORP.	ease.**	s TALI
en:	roual report mailings. Enter only one email address plail Address: FLORIDA PROFIT/NON PROFIT CORPORAT ECO TECH ROOFING CORP. Certificate of Status 0	ion	s TALI

Electronic Filing Menu

Corporate Filing Menu

Help

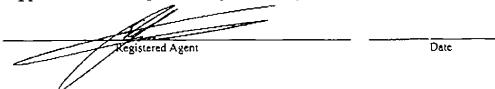
ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:	
Eco Tech Rooking Corp.	
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	
Migmi FL 33193	
ARTICLE III SHARES: The number of shares of stock is: / O () ARTICLE IV INITIAL DIRECTORS AND/OR OFFICER	
Edgrado Sgrabia (P)	2019 SEP 27
	27 PH
	1: 56
The name and Florida street address (PO Box not acceptable) of the register	
Eduardo Sarabia	
	
	ed agent is:

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



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.

