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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.

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From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : T20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944 Penter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**		Division of Co	rporations	
Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944		Fax Number	: (850)617-6381	ζ
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Account Number: 120000000019 Phone: (305)552-5973 Fax Number: (305)675-5944 PEnter the email address for this business entity to be used for future:		Account Name	: LAZARUS CORPORATE ETLING SERVICE. TAC.	- -í
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FLORIDA PROFIT/NON PROFIT CORPORATION CROWN SERVICE MIAMI INC

Certificate of Status	0
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Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:	
CROWN SERVICE HIAMI I	ω_{c}
ARTICLE II PRINCIPAL OFFICE:	 -
The principal street address and mailing address is:	
331.5W 104th CT Miami FL. 33174	
MIAM! FL. 33174	
ARTICLE III SHARES: The number of shares of stock is:	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	
KOSARIO BLANCO (P)	
5	10 M
71	当年に
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ARTICLE V INITIAL PECIETEDED A CONTROL	Υ
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the regis ered agent is:	
ROSARIO BLANCO	
331 SW 104 CT	
MIAMI FL 33174	
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:	
ROSARIO BLANCO	
331 SW 104 CT.	
MIAMI FL 33174	

Required Signatures:

3052201440

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

10 30 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.847.155, F.S.

incorporator

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TO THE LARY OF SEASON OF CHORALISM