Porice Department of the Lision of Corportion

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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To:			
	Division of Cou	rporations	
	Fax Number	: (850)617-6381	
From:			₩ ₀ ,
	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.	
	Account Number		
	Phone	: (305)552-5973	F (1) =
	Fax Number	: (305)675-5944	257 1
			- 65명 - 47
*Enter	the email address	s for this business entity to be used for fut	The Hand
anr	ual report maili	ngs. Enter only one email address please.**	
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FLORIDA PROFIT/NON PROFIT CORPORATION H2 LIVE INC

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:
H2 LIVE Inc
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
16011 SW 144 TERR, MIANI, FL,
ARTICLE III SHARES: The number of shares of stock is:/OO
(VP) ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS: (P) HECTOR MANUEL VENTURA BENITEZ
THECTOR MANUEL VENTURA BENITES
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the regis ered agent is:
HAROLD GARCIA
16011 SW 144 TERR MIAMI FL 32196
MIAMI FL 33196
ARTICLE VI INCORPORATOR, The control of the control
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is: HAROLD GARCIA
16011 SW 144 TERR
MIAM! FL 33196

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 1901 11/0 4/2019

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 \$317.155, R.S.

11/04/2019 I ate