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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.

Address:			
	Address:	Address:	Address:

FLORIDA PROFIT/NON PROFIT CORPORATION TECHOLOGIES LD INC

113 2 8 2020 T. SCOTT

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:	
Techologies Ld Inc	
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	
T2 118 WZ 07781	
Homestead Fl, 33030	
ARTICLE III SHARES: The number of shares of stock is: 100	
Carisad Y Piveron (P)	
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:	
The name and Florida street address (PO Box not acceptable) of the registered agent is:	ı 1
18770cw BILST	-
Homestead Fl 33030	441
Caridad & Riveron	· · · · · · · · · · · · · · · · · · ·
4 4	5
ARTICLE VI DICORPORATOR: The name and address of the theorporator is:	000
Caridad y Kiveron	
72 115 W2 07781	
Homestead FL, 33030.	

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.