sion of Corporations

Electronic Filing Cover Sheet

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(((H20000053180 3)))



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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 : (305)675-5944 Fax Number

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· PAGE 01/03

FLORIDA PROFIT/NON PROFIT CORPORATION AH PARTYRENTAL, CORP

| 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: |
|---|
| AH Partyrental, Corp |
| ARTICLE II PRINCIPAL OFFICE: |
| The principal street address and mailing address is: 170345W 95th Terrace |
| |
| ARTICLE III SHARES: The number of shares of stock is: 100 |
| ARTICLEN INITIAL DIRECTORS AND/OR OFFICERS: Alejandel Suris Fouche (P) |
| Hansel Suris Muina (P |
| |
| ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is: |
| ALEJANDEL SURIS FOUCHE |
| 17034 SW 95th TERR |
| MIAMI FL 33196 |
| ARTICLE VI INCORPORATOR: The name and address of the Ir.corporator is: ALEJANDEL SURIS FOUCHE 17034 SW 954 TERR |
| MIAMI FL 33196 |

Required Signatures:

| Having been named as registered agent to accept service of corporation at the place designated in this certificate, I am appointment as registered agent and agree to accept service of corporation at the place designated in this certificate, I am | process for the above stated familiar with and accept the t in this capacity |
|---|--|
| Registered Agent | 2/12/2020 |

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

Dire