Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973

Fax Number : (305)675-5944

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## FLORIDA PROFIT/NON PROFIT CORPORATION $R \in A$ COMFORT TRANSPORTATION INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
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## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

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ARTICLE I NAME: The name of the c

JECKL TARY OF STATE TALLAHASSEE, FLORIN:

	TALLAH
REB	COMFORT TRONSPORTATION INC.
·	ARTICLE II PRINCIPAL OFFICE:
	The principal street = 3.1
_	The principal street address and mailing address is:  19273 SW 381 LN  FL 33034
	HOMESTEAD FL. 33034
	T. OMCS/E HO
ARTICI	EIII SHARES: The number of shares of stock is:/OO
:	ARTICLE IV INITIAL DIRECTOR
	ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
	Meyna Alvasser (P)
<del></del>	
ARTIC	LEV INITIAL PECISTERED AGENCY
The name	LE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
ſ·	and Florida street address (PO Box not acceptable) of the registered agent is
1	CEYNA ALVAREZ
	9273 SW 581 LN
	HOMESTEAD FL 33034
ARTICL	EVI INCORPORATOR: The name and address of the Incorporator is:
	EYNA ALVAREZ
	0/
	7273 SW 381 CN

## 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.

Drite