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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
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From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
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LAZARUS CORPORATE FILING SERVICE, INC.

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
SANTIAGO STAFF SERVICES INC

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

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LAZARUS CORPORATE FILING SERVICE, INC.

5/6/2020

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

SANTIAGO STAFF SERVICES INC

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

1001 BRICKELL BAY DRIVE SUITE 2700 Q2
MIAMI FL 33131

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Noel Santiago Rodriguez Agudo
- PRESIDENT -

INCORPORATED IN FLORIDA
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ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

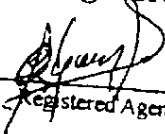
NOEL SANTIAGO RODRIGUEZ AGUDO
1001 BRICKELL BAY DRIVE SUITE 2700 Q2
MIAMI FL 33131

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

NOEL SANTIAGO RODRIGUEZ AGUDO
1001 BRICKELL BAY DRIVE SUITE 2700 Q2
MIAMI FL 33131


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 Agent _____ Date

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 _____ Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA