# **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 : (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.\*\*

<b>E</b> mail	Address:	 

### FLORIDA PROFIT/NON PROFIT CORPORATION **BEST WAY ALUNINUM CORP**

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

J. FASON

MAY 1 1 2020

3052201440

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

### **ARTICLE 1** NAME: The name of the corporation is:

ARTICLE II PRINCIPAL OFFICE	••
The principal street address and mailing add	ress is:
12620 SW 187 TERR	. 000 10.
MIAMI FL 33177	
	`
RTICLE III SHARES: The number of shares of stock is	: 100
ARTICLE IV INITIAL DIRECTORS AND/O	R OFFICERS:
RICARDO URDANIVIA PRESIDENT	
	· · · · · · · · · · · · · · · · · · ·
ARTICLE V INITIAL REGISTERED AGENT AND	STREET ADDRESS
ARTICLE V INITIAL REGISTERED AGENT AND State to the name and Florida street address (PO Box not acceptable) of	
	of the registered agent
ne name and Florida street address (PO Box not acceptable) o	of the registered agent
ne name and Florida street address (PO Box not acceptable) of RICARDO URDANIVIA  12620 SW 187 TERR	of the registered agent
ne name and Florida street address (PO Box not acceptable) of RICARDO URDANIVIA  12620 SW 187 TERR	of the registered agent
ne name and Florida street address (PO Box not acceptable) of RICARDO URDANIVIA  12620 SW 187 TERR	of the registered agent
ne name and Florida street address (PO Box not acceptable) of RICARDO URDANIVIA  12620 SW 187 TERR  MIAMI FL 33177	of the registered agent

### 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

BILARDO UNDALIDIA	05/07/2020
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.

RICARDO URDOUIDIA	05/07/2020
Incorporator	Date