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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:	Division of Corporations Fax Number : (850)617-6381		
From:	Account Name : LAZARUS CORPORATE Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944	E FILING SERVICE, 1	ENC.
30 20	the email address for this business nual report mailings. Enter only one ail Address:	entity to be used email address ple	2020 MAY SECRES
17 <i>-</i>	FLORIDA PROFIT/NON PROF A LIFE OF LOVE A		20 AM II: 05
	Certificate of Status	0	ĝ∄ 6
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in the rate	Estimated Charge	\$78.75	

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:					
A lipe of Love ACF INC					
ARTICLE II PRINCIPAL OFFICE:					
The principal street address and mailing address is:					
10930 SW 143 COUNT MTAMI FC 33186					
ARTICLE III SHARES: The number of shares of stock is:					
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICER:5:					
fullet Quintana. [PRESIDENT]					
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:					
The name and Florida street address (PO Box not acceptable) of the registered agent is:					
JULIET QUINTANA					
10930 SW 143 COURT					
MIAMI FL 33186 3					
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:					
10930 SW 143 COURT					
MIAMI FL 33186					
IVII HMI EC SUIV					

Cate

Required Signatures:

Having been named as registered agent	to accept service of process for the above stated
corporation at the place designated in t	his certificate, I am familiar with and accept the
appointment as registered a	gent and agree to act in this capacity
Rogistored Agent	

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 Blate constitutes a third degree felony as provided for in s.817.155, F.S.

Date