

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.

(((H20000169854 3)))



H200001698543ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

Phone : (305)552-5973

K. PAGE

Fax Number

: (305)675-5944

JUN 0.8 2020

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

Fma11	Address:			

## FLORIDA PROFIT/NON PROFIT CORPORATION K.D.R WELDING MECHANIC CORP

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

3

Electronic Filing Menu

Corporate Filing Menu

Help

**y.** 

• 06/05/2020 13:34 3052201440 LAZARUS CORPORATE

JUN/05/2020/FRI 10:39 AM Alternative Medical FAX No. 305-551-4337

P. 001

## ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:	•
K.D.R Welding Mechanic Corp	
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:  3108 26+h 5+ 5w	
Lehigh Acres, Fl 33976	
ARTICLE III SHARES: The number of shares of stock is:	
Pandy Jesus Oropesa Garrido (P)	
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:	
The name and Florida street address (PO Box not acceptable) of the registered agent is:	
handy Jesus Dropesa Garrido 3	
3108 26 th ST SW	n
Lehigh Acres, Fl 33976.	
ARTICLEVI INCORPORATOR: The name and address of the Incorporator is:	
Bandy Jesus Orolesa (active)	Ų
Handy Jesus Oropesa Garrido ====================================	

FAX No. 305-551-4337

P. 001/001

## 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

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

SELADADA SELESTE

06/01/2020