To: Page 2 of 4	Little 2020-06-12 20:39:15 (GMT) 2020-06-12 20:39:15 (GMT) 2020-07-07-07-07-07-07-07-07-07-07-07-07-07	la
r r	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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т.	Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page 12. Doing so will generate another cover sheet.	
	To: Division of Corporations Fax Number: : (850)617-6381 From: Account Name : EXPRESS CORPORATE F.ILING SERVICE INC. Account Number : I20000000146 Phone : (305)444-4994 Fax: Number : (305)444-4977	
	<pre>**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address:</pre>	
2	FLORIDA PROFIT/NON PROFIT CORPORATION	
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Page 3 of 4		2020-06-12 20:	39:15 (GMT)	13053284774 From: Yar
		ARTICLES OF IN In compliance with Chapter 607		
<u>ARTIC</u> The par	TLE I NAME me of the corpora	tion shall be: ALAS PROFESS	ONAL SERVICES, INC.	
150 Alt	CLE II PRINC on Rd Suite 703 Beach, FL 33139	CIPAL OFFICE Principal <u>street</u> uddress	Mailing address, i	f different is:
<u>.4RTIC</u> The pu	TLE III PURPO rpose for which t	<u>DSE</u> he corporation is organized is: <u>ANY A</u>	ND ALL LAWFUL BUSINESS	
<u>ARTIC</u> The nu	T.E.IV SHARI mber of shares of	ES stock is: SHARES: 100		
		ES stock is: SHARES: 100 L OFFICERS AND/OR DIRECTORS		
	<u>LE V INITIA</u>		Name and Title:	
	<u>LE V INITIA</u>	L OFFICERS AND/OR DIRECTORS	Name and Title: Address:-	JUN 12 AM
	<u>LE V INITIA</u> Name and Title	L OFFICERS AND/OR DIRECTORS Oscar Christian Aguilar (P/S/D)		
	<u>LE V INITIA</u> Name and Title Address	<u>L OFFICERS AND/OR DIRECTORS</u> Oscar Christian Aguilar (P/S/D) 150 Alton Rd Suite 703	Address:	
	<u>LE V INITIA</u> Name and Title Address	L OFFICERS AND/OR DIRECTORS Oscar Christian Aguilar (P/S/D) 150 Alton Rd Suite 703 Miami Beach, FL 33139	Address:	
	<u>LE V INITIA</u> Name and Title Address Name and Title:	<u>L OFFICERS AND/OR DIRECTORS</u> Oscar Christian Aguilar (P/S/D) 150 Alton Rd Suite 703 Miami Beach, FL 33139	Address: Name and Title:	
	<u>LE V INITIA</u> Name and Title Address Name and Title: Address	L OFFICERS AND/OR DIRECTORS Oscar Christian Aguilar (P/S/D) 150 Alton Rd Suite 703 Miami Beach, FL 33139	Address:	
	<u>LE V INITIA</u> Name and Title Address Name and Title: Address	L OFFICERS AND/OR DIRECTORS Oscar Christian Aguilar (P/S/D) 150 Alton Rd Suite 703 Miami Beach, FL 33139	Address: Name and Title:	

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. Address; Address ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Oscar Christian Aguilar Name: 150 Alton Rd Suite 703 Address: Miami Beach, FL 33139 HET JUN 12 AM 8: ARTICLE VII INCORPORATOR ILED The name and address of the Incorporator is:

Oscar Christian Aguilar Name: 150 Alton Rd Suite 703 Address:

Miami Beach, FL 33139

ARTICLE VIII EFFECTIVE DATE:

. (OPTIONAL)

Effective date, if other than the date of filing: ____ (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 uppointment as registered agent and agree to act in this capacity

1s/ Oscar Christian Aquilar	06/11/2020
Required Signature/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.

/s/ Oscar Christian Aguilar Required Signature/Incorporator

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