Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019

Phone Fax Number

: (305)552-5973 : (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.

Fugit	Address:	
	-	

FLORIDA PROFIT/NON PROFIT CORPORATION ALL SERVICES G&L INC

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

LL SERVICES G&L	INC
	ARTICLE II PRINCIPAL OFFICE:
The	e principal street address and mailing address is:
11250 SW 13 th Pla	ce. Davie FL 33325
ARTICLE III SI	HARES: The number of shares of stock is: 100
ARTICLE I	V INITIAL DIRECTORS AND/OR OFFICERS: (P)
lises Gabriel Buosi	
LUIS Ma.	nuel Alvarez chirinos (VP)
ARTICLE V I	NITIAL DECICEPED AGENT AND OFFICE
	A street address (PO Box not acceptable) of the registered agent is:
ULISES	GABRIEL BUOSI
	SW 13th PLACE
DAVIE	
ARTICLE VI IN	NCORPORATOR: The name and address of the Incorporation is:
ULISES	GABRIEL BUOSI
1/250	SW 13th PLACE
	E1 33375

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 07/13/2020

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.

2020 JUL 13 AM 10: 16