

P20000058569

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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.

((H20000260925 3)))



H200002609253ABC-

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
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.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
GOD IS THE PLUG DELIVERY & SERVICES CO.**

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

20 AUG - 6 PM 12:45

2020 AUG - 4 PM 2:59

RECEIVED

RECEIVED
DIVISION OF CORPORATIONS
COMMERCIAL
SERVICES

C RICO
AUG 04 2020

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

God is the Plug Delivery & Services Co.

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

1240 NW 178 Terr.
Miami, FL 33169

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Joseph A. Peyro (P)
Alice M. Gonzalez (VP)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Alice M. Gonzalez
1240 NW 178 Terr.
Miami, FL 33169

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Joseph A. Peyro
1240 NW 178 Terr.
Miami, FL 33169

20 AUG -6 PM 12:45

Required Signatures:

Having been named as registered agent to accept service of process for the above state corporation at the place designated in this certificate, I am familiar with and accept appointment as registered agent and agree to act in this capacity

 8-4-20
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 third degree felony as provided for in s.817.155, F.S.

J. Anthony DePina _____
Incorporator Date