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.

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.From: Account Name : LAZARUS CORPORATE FILING SERVICE. IN-	
Fax Number : (850)617-6381 From: Account Name : LAZARUS CORPORATE FILING SERVICE. IN-	_
From: Account Name : LAZARUS CORPORATE FILING SERVICE. IN-	•
Account Name : LAZARUS CORPORATE FILING SERVICE, INC.	
Account Number . Thomassesses	• •
Account Number : I20000000019 Phone : (305)552-5973	
Fax Number : (305)675-5944	

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 MUTUAL TRUST CONSULTING AND INVESTMENTS GROUP CORE

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:
ARTICLE I NAME: The name of the corporation is: MUTUAL TRUST CONSULTING AND TOWESTMENTS ON ARTICLE IL PRINCIPAL OFFICE: CONSULTING AND TOWESTMENTS OF CONTROLLE IL PRINCIPAL OFFICE:
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mail:
4505 West Flagler St Suite 201-6
4505 West Flagler St Suite 201-62 MiaMi Fl, 33/34
ARTICLE III SHARES: The number of shares of stock is: 100
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICES:
\(\)
Jose 6 Hartin (President)
`
ARTICLE V INITIAL REGISTERED AGENT AND STREET AUDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
Jose 6. Martin
/1043 SW 124 CT
PliAHI FL, 33184
ARTICLE VI UNCORPORATOR: The name and address of the Incorporator is:
JOSE G. MARTIN
1043 SW /2X CT
MIAMI FL 3318X

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 6-11-2020

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.

8-11-2020 Esic

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