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To:

Division of Corporations

Fax Number ; (850)617-6381

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

MANAGER LHO	i, corp
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 II ' PRINCIPAL OFFICE	i.
The principal street address and mailing add	ress is:
3860 E 5TH AVE. HIALEAH, FLORIDA 33013	
TICLE III SHARES: The number of shares of stock is	100
ARTICLE IV INITIAL DIRECTORS AND/O	ROFFICERS:
LAZARO HERNANDEZ CABRERA PRES	DENT
3860 E 5TH AVE. HIALEAH, FL. 33013	
BARBARO OSMUNDO HERNANDEZ LOPEZ. VIC	E PRESIDENT
3860 E 5TH AVE. HIALEAH, FL 33013	
ARTICLE V INITIAL REGISTERED AGENT AND S	
e name and Florida street address (PO Box not acceptable) o	t the registered agent is
LAZARO HERNANDEZ CABRERA	
3860 E 5TH AVE. HIALEAH, FL. 33013	
•	
RTICLE VI INCORPORATOR: The name and address	

## 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

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