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To:

Division of Corporations
Fax Number : (850)617-6381

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Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
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**FLORIDA PROFIT/NON PROFIT CORPORATION
CYNTHIA LAMAA PA**

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

2020 AUG 26 PM 1:21
STATE OF FLORIDA
DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Cynthia Lamaa Pa

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

Mailing address, if different is:

6050 SW 46th ST
MIAMI FL 33155

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: REAL ESTATE BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Cynthia Lamaa Name and Title: PDS

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Monica Tirado, Esq.

Address: 2655 Lejeune rd.
Suite 1109, Coral Gables FL 33134

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Cynthia Lamoa

Address: 6050 SW 46th St
Miami FL 33155

.....
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 signing with and accept the appointment as registered agent and agree to act in this capacity

[Signature]
Required Signature/Registered Agent

8/20/2020
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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.

[Signature]
Required Signature/Incorporator

8/19/2020
Date