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Florida Department of State
Division of Corporations
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To:
Division of Corporations
From:

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

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
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****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
OSWORK CORP

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

ALL CHARGES PAID

2020 SEP -3 PM 4:52

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

2020 SEP -3 PM 4:52

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ARTICLE I NAME: The name of the corporation is:OSWORK Corp**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

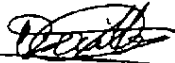
1390 SW 6th St APT 8 33135 MIAMI FL**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Oscar Danilo Avilez Castillo (P)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

Oscar Danilo Avilez Castillo1390 SW 6th St APT 8MIAMI FL 33135**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:OSCAR DANILLO AVILEZ CASTILLO1390 SW 6th St. Apt 8MIAMI FL 33135

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_____
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.

_____
Incorporator_____
Date