OD

Division of Corporations **Electronic Filing Cover Sheet**

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To:				
	Division of Corporations			
	Fax Number	: (850)617-6381	,	1829 I
From:				8
	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.	•	i i
	Account Number	: 120000000019		1
	Phone	: (305)552-5973		Ç
	Fax Number	: (305)675-5944	•	P P
			÷	٠ <u>:</u>
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FLORIDA PROFIT/NON PROFIT CORPORATION A+ MARI COIN LAUNDRY INC.

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is: A+ Mari Coin ARTICLE II PRINCIPAL OFFICE: The principal street address and mailing address is: 100 ARTICLE III SHARES: The number of shares of stock is: ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS: ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is: leadow **ARTICLE VI** INCORPORATOR: The name and address of the Incorporator is:

10/06/2020	16:25	3052201440
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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

egistered Agent

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 S are constitutes a third degree felony as provided for in s.817455, F.S.

Incorporator

Trate