PAGE 01/03 10/07/2020 15:18 LAZARUS CORPORATE 3052201440 Florida Department of State **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.

(((H20000348093 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:					
	Division of Corporations				20
	Fax Number : (850)617	7-6381		-	2020 OCT
From:					1
	Account Name : LAZARUS	CORPORATE FIL	ING SERVICE,	INC.	ò
	Account Number : 1200000	20019	-		
	Phone : (305)552	2-5973			5
	Fax Number : (305)675	5-5944		• ;	ယ္
					ယ
*Enter	the email address for this	husiness enti	ty to be used	For future	
Em	ail Address:		·····		.
	FLORIDA PROFIT/NO				2020 C
	FLORIDA PROFIT/NOI C&V ELECTRI		CORP.		OCT
	FLORIDA PROFIT/NOI C&V ELECTRI Certificate of Status		CORP.		2020 OCT - 6
	FLORIDA PROFIT/NOI C&V ELECTRI		CORP.		ן ר
	FLORIDA PROFIT/NOI C&V ELECTRI Certificate of Status		CORP.		ן ר
	FLORIDA PROFIT/NON C&V ELECTRI Certificate of Status Certified Copy		0 1	ION	ן ר
	FLORIDA PROFIT/NOI C&V ELECTRI Certificate of Status Certified Copy Page Count	C SERVICE	0 1 03	ION	ן ר
	FLORIDA PROFIT/NOI C&V ELECTRI Certificate of Status Certified Copy Page Count Estimated Charge	IC SERVICE	0 1 03		

ê

ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit) **ARTICLE I** NAME: The name of the corporation is: Service nie COF ARTICLE 11 PRINCIPAL OFFICE: The principal street address and mailing address is: W 42 St ARTICLE III _____ SHARES: The number of shares of stock is: ____ 100 ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS: Ctur SIDENT ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is: บัยี ADDEL TOR OMIX 190 2 S7 AH 10: 23 400 EAH 3012 ARTICLE VI INCORPORATOR: The name and address of the Incorporator is: CIDR 190ミン Ξl

Ź Э

EAF

51

12

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 familia: with and accept the appointment as registered agent and agree to act in this capacity Registered AgentI 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 constitution.

ree telony as provid	ed for in s.817.155, F.S.	partment of State constitutes a
V		
	Incorporator	

:

1020 OCT -6 AM 10: 23 معدد) محدد) ا (T)

Date