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.

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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 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:	
	<del></del>	

## FLORIDA PROFIT/NON PROFIT CORPORATION LA RIVERO INC

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

## ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

onapter 607 (Profit)	
ARTICLE I NAME: The name of the corporation is:	
/ // D / / > Corporation is:	
LA RIVERO INC	
ARTICLE II PRINCIPAL OFFICE:	
The principal street add-	
HAILE HILLIAM	
FL 93010	-
	_
ARTICLE III SHARES: The number of shares of stock is:	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	
Josniel Rivero Blamco (P	f
0	
	_
ARTICLE V INFELAL REGIOTERS	
ARTICLE V INITIAL REGISTERED AGENT AND STREET AD DRES	<u>S:</u>
he name and Florida street address (PO Box not acceptable) of the registered agenty of the Rivero Blanco	t is:
on the Niverso Dianco	-
BALSE 9TH AVE HIALEAH	_
FL 33010	_
	-
RTICLE VI INCORPORATOR: The name and address of the Incorporator	is:
JUSTIEL KIVERO BIANCO	_
- 831 SE 9 AVE	
Hialeah FL 33010	
	_

## 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 familian with and accept the appointment as registered agent and agree to act in this capacity

Bogistered 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