

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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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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Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
CPS SERVICE AND REPAIR INC

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

2020 OCT 30 PM 4:06

2020 OCT 30 AM 11:09

FILED

82K
11/10/20

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:CPS SERVICE AND REPAIR INC**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

9471 Lisa RdCutler Bay FL 33157**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Pedro I Say (P)Antonio Say (VP)

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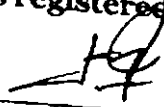
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Pedro I Say9471 Lisa RdCutler Bay FL 33157**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Pedro I Say9471 Lisa RdCutler Bay FL 33157

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

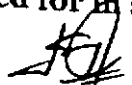


Registered Agent

10-30-2020

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

10-30-2020

Date

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