

Florida Department of State
Division of Corporations
Electronic Filing Service Unit

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

From:
Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
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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.****

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FLORIDA PROFIT/NON PROFIT CORPORATION
APR EVOLUTION X INC

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

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:APR EVOLUTION X INC**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

8377 NW 68N STMIAMI FL 33166**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**ANDREA PAOLA RODRIGUEZ(PRESIDENT-VICE-SECRETARY-TREASURE)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

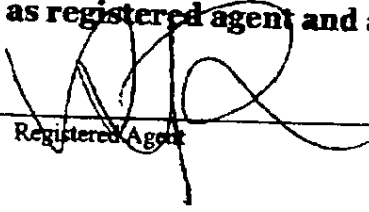
The name and Florida street address (PO Box not acceptable) of the registered agent is:

ANDREA PAOLA RODRIGUEZ8377 NW 68 STMIAMI FL 33166**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:ANDREA PAOLA RODRIGUEZ6900 MENTONE STCORAL GABLES FL 33146

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Required Signatures:

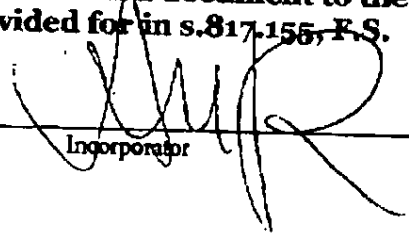
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Registered Agent12/01/2020

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.



Incorporator12/01/2020

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FILE