

Florida Department of State  
Division of Corporations  
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**P2000092539**

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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  
ALL WORLD SERVICES, P.A.**

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

2020 DEC -3 PM 3:43

DATE  
FILE

2020 DEC -3 PM 1:31

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

ALL WORLD SERVICES, P.A.**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

EIN 26-4538948

Principal street address

7175 SW 8th #210

Mailing address, if different is:

MIAMI FL 33149SAME**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

BUSINESS SERVICES2020 DEC - 1 PM 1:31  
STATE  
RECEIVED**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: ELIA AMADOR (P)

Name and Title: \_\_\_\_\_

Address: 7175 SW 8th

Address: \_\_\_\_\_

Suite #210 - Miami FL 33149

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Eli a Amador

Address: 7175 SW 8st Suite#210  
Miami FL 33144

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Eli a Amador

Address: 7175 SW 8st Suite#210  
Miami FL 33144

\*\*\*\*\*  
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



Required Signature/Registered Agent

\_\_\_\_\_  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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.



Required Signature/Incorporator

\_\_\_\_\_  
Date

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