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	Division of Cor		_
	Fax Number	: (850)617-6381	
From:			;
	Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.	-
	Account Number	: I200000000019	. —
	Phone	: (305)552-5973	
	Fax Number	: (305)675-5944	
ann	the email address wal report maili il Address:	s for this business entity to be used for many formal for many one email address please.*	future •

## FLORIDA PROFIT/NON PROFIT CORPORATION DRYWALLJGS CORP

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

2021 J.S.1 - 6 PH 4: 0.7

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

**ARTICLE I** NAME: The name of the corporation is:

ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	
1972 Red caryon drive	
Kissimmer Florida 34744	
	<del></del>
RTICLE III SHARES: The number of shares of stock is: 100	
ARTICLE IV INITIAL DIRECTORS AND ISSUE	
See C. Se	ERS:
- 300 Grzgorio SANTIAgo (P)	<u>59</u> -
	=- : =: : : :
	<del></del>
ARTICLE V INITIAL REGISTERED AGENT AND STREET A	ADDRESS:
e name and Florida street address (PO Box not acceptable) of the regist	erud agant is
- 10 - Led Conyon drive Kissi MME F F	lori di-
347 461	· · · · · · · · · · · · · · · · · · ·
JOSE GREGORIO SANTIAGO	<del></del>
RTICLE VI INCORPORATOR: The name and address of the Incorporation	orporator is:
JOSE GREGORIO SANTIAGO	
1872 RED CANYON DR KISSIMMEE FLORIDA 34744	<del></del>

## 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 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