

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.

(((H21000025140 3)))



H210000251403ABCP

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

Division of Corporations Fax Number : (850)617-6381 From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944 PEnter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**	To:	_, , , , , , ,		
Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944			·	
Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944		Fax Number	: (850)617-6381	
Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944 *Enter the email address for this business entity to be used for future	From:			
Phone : (305)552-5973 Fax Number : (305)675-5944 *Enter the email address for this business entity to be used for future		Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.	
Fax Number : (305)675-5944		Account Number	: I2 0000000 019	•
Fax Number : (305)675-5944 ;. *Enter the email address for this business entity to be used for future		Phone	: (305)552-5973	
*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**		Fax Number	: (305)675-5944	1.
	'*Enter ani	the email addres nual report maili	s for this business entity to be used for ings. Enter only one email address please.	future ••

FLORIDA PROFIT/NON PROFIT CORPORATION NYLAN WHOLESALE CORP.

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

121 J. 119 Ph 4: 26

ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:
Nylan WHolesale Corp.
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
6700 NW 186 ST HIGHERH P.33015 FL Apr. 512
Apr. 512
ARTICLE III SHARES: The number of shares of stock is: 100
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
Anibal Emilio Lovera Alvis P
TIMO SOUTH TILLIS
707
: .
ARTICLE V INITIAL REGISTERED AGENT AND STREET AND PERSON
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is:
Anibal Emilio Lovera Alvis
(200 My) 186 CT Highert FT 32015.
6700 NW 186 ST Higheath FL 32015.
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
Anibal Emilio lovera Alvis
6700 NW 186 ST Higleat FL 33015.
APT 512

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

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.