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.

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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 : (305)675-5944 Fax Number

\*\*Enter the email address for this business entity to be used for future\_\_\_ annual report mailings. Enter only one email address please. \*\*

Email Address:

## FLORIDA PROFIT/NON PROFIT CORPORATION LICOR CITY CORP

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

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

Licor City Corp	
ARTICLE II PRINCIPAL OFFICE	<u>:</u>
The principal street address and mailing addr	ess is:
11300 <u>NW 58th Ter Unit# 11300, Doral, FL 33178</u>	
	<del></del>
ARTICLE III SHARES: The number of shares of stock is:	100
ARTICLE IV INITIAL DIRECTORS AND/OR	OFFICERS:
Gilbert Contreras - P	2
	17 Tu
	3-
ARTICLE V INITIAL REGISTERED AGENT AND ST  The name and Florida street address (PO Box not acceptable) of	<del>-</del>
11300 NW/ 58th Tar Unit# 11300 Dorol 51 33179	
Gilbert contreras	
	<del></del>
ARTICLE VI INCORPORATOR: The name and address	of the Incorporator is:
1300 NW 58th Ter Unit# 11300, Doral, FL 33178	
ilbert <u>contreras</u>	

## 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

| 01/25/2021 | 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.



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