

## Florida Department of State

Division of Corporations  
Electronic Filing Cover Sheet**P2100029718**

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.

(((H21000131356 3)))



H210001313563ABOW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.  
Doing so will generate another cover sheet.

## To:

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

\*\*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  
STAR APPLIANCES MULTISERVICE RAPID INC**

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

2021 APR -1 PM 4:59

RECEIVED

CORPORATE  
FILING  
SERVICE

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME:** The name of the corporation is:Star Appliances Multiservice Rapid  
INC**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

3195 NW 61st Miami FL 33142**ARTICLE III SHARES:** The number of shares of stock is:100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Jose Luis Martinez Prieto P**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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


Jose Luis Martinez Prieto  
3195 NW 61st Miami FL 33142**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Jose Luis Martinez Prieto  
3195 NW 61st Miami FL 33142FILED  
321 FEB - 1 11:31  
CLERK OF COURT  
MIAMI

**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

FILED  
021 APR -1 0411:31  
CLERK OF COURT  
JULIA L. BROWN