

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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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
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****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
HERMANOS PARRA PAINT & PRESSURE CLEANING INC

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

6/3/21

FILED

2021 JUN -2 PM 2:13

2021 JUN -2 PM 5:01

ARTICLES OF INCORPORATION

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

ARTICLE I NAME: The name of the corporation is:Hermanos Parra Paint & Pressure cleaning inc**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

451 SE 8TH ST 85 Homestead
FL 33030**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Manuel IHOSVANNY Lopez Parra
(PRESIDENT)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

MANUEL IHOSVANNY LOPEZ PARRA
451 SE 8th ST 85
HOMESTEAD FL 33030**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:MANUEL IHOSVANNY LOPEZ PARRA
451 SE 8th ST 85
HOMESTEAD FL 33030FILED
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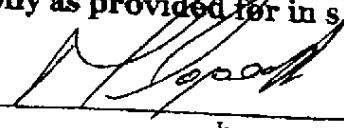
Required Signatures:

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

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STATE