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Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019

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

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FLORIDA PROFIT/NON PROFIT CORPORATION **GUS LIGHT CORP**

| Certificate of Status | 0 |
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JUN 08 2021

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Corporate Filing Menu

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

| ARTICLE I NAME: The name of the corporation is: |
|---|
| GUS LIGHT CORP |
| ARTICLE II PRINCIPAL OFFICE: |
| The principal street address and mailing address is: |
| 150 NE 7951 APT 1802 MIANI FL |
| 33138 |
| |
| ARTICLE III SHARES: The number of shares of stock is: |
| ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS: |
| 6USTAUD GABRIEL GONZALEZ (P) |
| 150 NE 2951 APT 1802 MAHI FL 33138 |
| 150 NE 7951 APT 1802 MAHI FL 33138 EE 2 |
| FTI T |
| |
| \mathbb{R}^{n} ω |
| ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: |
| The name and Florida street address (PO Box not acceptable) of the registered agent is: |
| GUSTAVO GABRIEL GONZALEZ |
| 150 NE 795T Apt 1802 |
| MIAMI P. 33138 |
| ADTIOLE IVE TICODDOD ATOD. The name and address of the Imagina with its |
| ARTICLE VI INCORPORATOR: The name and address of the Incorporator is: GUSTAVO GABRIEL GUNZALEZ |
| 150 NE 79 ST Apt 1802 |
| MIGNAL GI 33138 |

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 familian 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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