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 Co	rporations					
	Fax Number	: (850)617-6381					
From:							
	Account Name	: LAZARUS CORPOR	ATE FILIN	NG SERVICE,	INC.	, , ,	- -
	Phone	: 120000000019 : (305)552-5973					1 '
		: (305)675-5944					
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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME: The name of the corporation is:

Cultificael Horstine 3 Grosso Inc.
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
Hiakah 41. 33013
ARTICLE III SHARES: The number of shares of stock is: 100
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
ARTICLE V INITIAL REGISTERED AGENT AND STREET AL DRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is:
Nivrka Martinez
1065 E 235+ #A
Hialah F1 33013
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
Nivika Marfinez
685 E 235T #A
Hialeah F1 33013

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

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.