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 Tax Number : (850)617-6381 Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : 120000000019 Phone : (305)552-5973 Tax Number : (305)675-5944 Re email address for this business entity to be used for followers to be used for followers. Address: Address:		LAHASSEE, PLORIDY	282 JUL -9 AM 8: 35 2221.
aı	the email address for this business entity to nnual report mailings. Enter only one email ad- mail Address:	dress please.	future **	100 mg
aı	nnual report mailings. Enter only one email ad	dress please.	**	Field Jan 9 PH
aı	FLORIDA PROFIT/NON PROFIT CORI	dress please.	**	PH 3:
ai Ei	FLORIDA PROFIT/NON PROFIT CORI	dress please. PORATION	**	PH
aı	FLORIDA PROFIT/NON PROFIT CORI MAYRA'S STYLE INC. Certificate of Status	PORATION	**	PH 3:

ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:		
Maura's Cill T		
ruyias style Inc.		
ARTICLE II PRINCIPAL OFFICE:		
The principal street address and mailing address is:		
14162 SW 148 PL		
miami, fl 331910		
	, ₹	2
ARTICLE III SHARES: The number of shares of stock is: 100	A HAR	# JUL -
ARTICLE IV INITIAL DIRECTORS AND OR OFFICIERS	141 - 4 141 - 4	9
A CONTROL OFFICERS:	7. E. C. N	Z
Mayra A. Castillo (p)	<u> - 22</u>	€0 €0
	_ 7	39
	_	
		
		
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS	<u>5:</u>	
The name and Florida street address (PO Box not acceptable) of the registered agen	t is:	
- Mayra A. Castillo		
14162 SW148 PL	_	
miami, fl 33196	_	
ADTIOLDAG	-	
ARTICLE VI INCORPORATOR: The name and address of the Incorporator Wayra A. Cashillo	is:	
14162 SW 148 PL	_	
Miami Fl 23196	_	

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

elfaction Castillo 71-77-2021

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.

Ilfaring Castillo

7-07-2021