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To:

Division of Corporations

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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973

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FLORIDA PROFIT/NON PROFIT CORPORATION LOPEZ OSNIEL 88 CORP

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

2071 : 18 Pii 4: 4

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is: ARTICLE II PRINCIPAL OFFICE: The principal street address and mailing address is: ARTICLE III SHARES: The number of shares of stock is: / () INITIAL DIRECTORS AND/OR OFFICEF; S: ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is: INCORPORATOR: The name and address of the Incorporator is: (ARIDAD

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 familia: 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.