

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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		Division of Co	rporations	•			
		Fax Number	: (850)617-6381				
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4: 1		Account Name	: LAZARUS CORPORATE FILING SERVICE, INC.	- -			
			: I20000000019	-			
<u></u>		Phone	: (305)552-5973	ر: ر			
a-		Fax Number	: (305)675-5944	ن			
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· ·	**Ente	er the email addr annual report ma	ress for this business entity to be used for future ilings. Enter only one email address please.**	e			
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FLORIDA PROFIT/NON PROFIT CORPORATION NATIONAL WHOLESALE SIGN CORP.

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

Electronic Filing Menu

Corporate Filing Menu

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J DENNIS

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I	NAME: The name of the corporation is:
ANTICLE	MANAE THE Hame of the corporation

	ARTICLE II PRINCIPAL OFFICE:
	The principal street address and mailing address is:
	7215 W 3 Ave
	Hialeah FL 33014
RTJ	ICLE III SHARES: The number of shares of stock is: 100
	ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
_	LUIS & Hernandez (President)
	·
	<u> </u>
	TICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS
	name and Florida street address (PO Box not acceptable) of the registered agent
116 1	
_	7215 IN 3 Ave
_	
_	High FL 33014
	THOU PAR DICOPPORATION. The name and address of the Innoversity
X K.	TICLE VI NCORPORATOR: The name and address of the Incorporator LUIS E HERNANDEZ
_	
	7215 W 3 AVE

3052201440

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

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.