LAZARUS CORPORATE

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973 : (305)675-5944 Fax Number

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

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EDMITT WOOLESS:		

FLORIDA PROFIT/NON PROFIT CORPORATION D V M G CORPORATION

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



ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

•	ARTICLE II PRINCIPAL OFFICE:
	The principal street address and mailing address is:
89	165 Sw 172 nd Avenue
	Apt 1614
	Mami, PL 33196
TICLE III	SHARES: The number of shares of stock is:
ARTICI	LE IV INITIAL DIRECTORS AND/OR OFFICERS:
	Mara Guerrero (P)
·	
<u>.</u>	
ARTICLE V	INITIAL REGISTERED AGENT AND STREET ADDRESS:
e name and Flo	orida street address (PO Box not acceptable) of the registered agent is:
M	laria Guerrero
	5 Sw 172m2 Auchoe
	APT 1614 Mani 1 33191
896 RTICLEVI	INCORPORATOR: The name and address of the Incorporator is:

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

Registered Agent

9 29 21

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

9 28 21 Date