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.

(((H22000028171 3)))



H220000281713ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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

Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION **GOLDEN WAY 21 CORPORATION**

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

Electronic Filing Menu

Corporate Filing Menu

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

| ARTICLE II PRINCIPAL O | <u>)FFICE;</u> |
|---|----------------------------------|
| The principal street address and mail | ing address is: |
| 7852 sw 24 street Miami FL 33155 | 5 |
| | |
| ARTICLE III SHARES: The number of shares of | stock is: 100 |
| ARTICLE IV INITIAL DIRECTORS A | - 인 AND/OR OFFICERS: 발경 한덕 |
| (P) Jose E Abello | <u> </u> |
| | <u> </u> |
| | <u>3</u> \{ |
| · · · · · · · · · · · · · · · · · · · | |
| | |
| A NAME OF THE PARTY AS TAX OF | AND STREET ADDRESS: |
| ARTICLE V INITIAL REGISTERED AGENT | ptable) of the registered agent |
| The name and Florida street address (PO Box not accept | |
| | · |
| The name and Florida street address (PO Box not accept | |
| The name and Florida street address (PO Box not accerdance) Jose E Abello | |

Required Signatures:

| Having been named as registered agent to accept corporation at the place designated in this certific appointment as registered agent and a | cate. I am familiar with and accept the |
|--|---|
| Registered Agent | 01/21/2:022 Date |
| I submit this document and affirm that the facts sta the false information submitted in a document to the third degree felony as provided for in s.817.155, F.S. | he Department of State constitutes a |
| Incorporator | 01/21/2022 Date |

FILED