2/16/22, 11:13 AM Division of Corporations

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Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
LIFE & TRUST ENTERPRISES CORP.

Certificate of Status	0
Certified Copy	1
Page Count	03
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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: **LIFE & TRUST ENTERPRISES CORP.**

ARTICLE II PRINCIPAL OFFICE

Principal street address

7985 NW 8 STREET
APT 107 A

MIAMI, FLORIDA 33126

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DENISSA A. QUINTERO EXPOSITO, PRESIDENT

Address: 7985 NW 8 STREET, APT 107 A, MIAMI, FL 33126

Name and Title:

Address:

Name and Title: LUIS A VIVIESCAS TOVAR, VICE PRESIDENT

Address: 7985 NW 8 STREET, APT 107 A, MIAMI, FLORIDA 33126

Name and Title:

Address:

Name and Title:

Address:

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Name and Title: _____ Name and Title: _____

Address _____ Address: _____

_____ _____

_____ _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: IRAIDA R BROUWER

Address: 14170 NW 5 PLACE

NORTH MIAMI, FLORIDA 33168

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: IRAIDA R BROUWER

Address: 14170 NW 5 PLACE

MIAMI, FLORIDA 33168

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 02/14/2022 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Required Signature/Registered Agent — Date: 2/14/22

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.

Required Signature/Incorporator — Date: 2/14/22

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