Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number

3052201440

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 1200000000019

Fax Number

Phone

: (305)552-5973 : (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:	
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FLORIDA PROFIT/NON PROFIT CORPORATION ANDERZON CORP

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

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Corporate Filing Menu

Help

ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

Anderzon Corp		
ARTICLE II PRINCIPAL OFFICE:		
The principal street address and mailing address is:		
6605 SW 152nd CT Miami FL 33913		
ARTICLE III SHARES: The number of shares of stock is:		
APTICIE III INTERIORI AND CONTROL	SEC	1320
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICE	RS: AND	HAR
Nicole Anderzon (P)	——————————————————————————————————————	30
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ARTICLE V INITIAL REGISTERED AGENT AND STREET	ADDRESS:	
The name and Florida street address (PO Box not acceptable) of the regis		s:
Nicole Anderzon		
6605 SW 152nd CT Miami FL 33193		
ARTICLE VI INCORPORATOR: The name and address of the I	ncorporator i	is:
Nicole Anderzon		_
605 SW 152nd CT Miami FL 33193		_
		_

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

Norden 03/29/2022
Registered Agent Date

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.

Inforporator

ALLAHASSEE, FLOF

FILED