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(((H22000133056 3)))



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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 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 **BRENDAT'S CORP**

Certificate of Status	0
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Corporate Filing Menu

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## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

**ARTICLE 1** NAME: The name of the corporation is:

The principal street address and mailing address is:	
The principal street address and mailing address is:	
6055 NW 75t Apt: 1001 Miami, TL, 33126	<del></del> _
MIAMI, TL, 33126	
CLE III SHARES: The number of shares of stock is:	00
ARTICLE IV INITIAL DIRECTORS AND/OR OFFIC	CFRS:
Brenda Molina (P)	
	<del></del>
	<u></u>
	A.C. 1
	17
	P 2
ICLE V INITIAL REGISTERED AGENT AND STREET	
me and Florida street address (PO Box not acceptable) of the reg	istered agent
	<del></del>
5055 NW 75+ Ab+:1001	<del></del>
MiAMI, FL, 33126	
CLE VI INCORPORATOR: The name and address of the I	ncorporator i
BRENDA HOLINA	
5055 NW 75+ Apt 1001	

## **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 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.

Incorporator Date

1ALLAHASSIL SINTE