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To:

Division of Corporations

3052201440

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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:		_		
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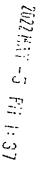
## FLORIDA PROFIT/NON PROFIT CORPORATION LYSS AND KHLOE CORPORATION

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## 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	
26780 sw 142 ave 1	nomestead
II,33032	
ICLE III SHARES: The number of shares of stock is: _	100
ARTICLE IV INITIAL DIRECTORS AND/OR	OFFICURE.
Lyon Marrero Pirez (P)	OFFICIAS:
THE MINISTER CE	
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The state of the s	
RTICLE V INITIAL REGISTERED AGENT AND ST	TREET ADDRESS
name and Florida street address (PO Box not acceptable) of	•
Lyss Marrero Pere	2
	1e
26780 SW 142 AV	
26780 SW 142 Av Homestead FL 3	303L
26780 SW 142 Av Homestead FL 3	3032
26780 SW 142 AV Homestead FL 3  RTICLEVI INCORPORATOR: The name and address	of the Incorporator
26780 SW 142 AV Homestead FL 3  RTICLEVI INCORPORATOR: The name and address Lyss Marrero Her	of the Incorporator

## 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 familian with and accept the appointment as registered agent and agree to act in this capacity

Registered Agent

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 8.817.155. F.S.

Incorporator

Date