

**P22000044037**Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**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.**

(((H22000195018 3)))



H220001950183ABC

**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 : 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  
ICON FUNDING GROUP INC.**

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

RECEIVED

2022 JUN -3 PM 4:47

CORPORATIONS  
COMMERCIAL  
SERVICESALL INFORMATION  
IS PUBLIC

2022 JUN -3 PM 2:05

Electronic Filing Menu

Corporate Filing Menu

Help

28

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

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

Icon Funding Group Inc.

**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

11830 Sw 104th Ln  
Miami FL 33186

**ARTICLE III SHARES:** The number of shares of stock is: 100

**ARTICLE IV , INITIAL DIRECTORS AND/OR OFFICERS:**

Demuel Guerra (p)

**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

11830 Sw 104th Ln  
Miami FL 33176  
Lemuel Guerra

**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:

Lemuel Guerra  
11830 SW 104th LN  
Miami FL 33186

**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

6/3/22  
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

6/3/22  
Date

2022 JUN -3 PM 2:05

LAZARUS CORP  
FL