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To:

Division of Corporations
Fax Number : (850)617-6381

Handwritten signature and date: 6/29/22

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: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
NO BULTO LIMOUSINE SERVICE INC**

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

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REGISTRATION
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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

NOBULTOLIMOV SERVICE

ARTICLE II PRINCIPAL OFFICE:

INC

The principal street address and mailing address is:

25 EAST 15TH STREET HIALEAH FL
33010

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

100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Gregorio Tejada VICENTE
(P)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Gregorio Tejada vicente
25 East 15th Street Hialeah FL
33010

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

Gregorio Tejada Vicente
25 East 15th Street Hialeah FL
33010

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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

Gregorio Espada

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.

Gregorio Espada

Incorporator Date

2022 JUN 29 12:07:32