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To:

Division of Corporations

Fax Number

3052201440

: (850)617-6381

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 GARY'S WELDING SERVICES INC.

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

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Corporate Filing Menu

Help





ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

| ARTICLE NAME: The name of the corporation is: |
|---|
| GARY'S Welding Services INC. |
| ARTICLE II PRINCIPAL OFFICE: |
| The principal street address and mailing address is: |
| -28030 SW 132 AVE |
| Homestead FL 33033 |
| 100 |
| ARTICLE III SHARES: The number of shares of stock is: |
| ARTICLE IV INITIAL DIRECTORS AND/OR OFFICIERS: - GARY GONZA/EZ (P) |
| · · · · · · · · · · · · · · · · · · · |
| |
| 29 |
| |
| |
| ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: |
| The name and Florida street address (PO Box not acceptable) of the registered agent is: |
| Garu Gonzalez |
| 28030) SUD 122 AVE. |
| Homestead Fl 33033 |
| TIONCOTECICI 12 35033 |
| ARTICLE VI INCORPORATOR: The name and address of the Incorporator is: |
| Garu Gonzalez |
| 28038 SID 137 AVA |
| Homestand FL 33032 |

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 ja s.817.155, F.S.

Date /

2 JUN 29 AH 2: 13