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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:		
CRIGIT MACH COO.	 	

FLORIDA PROFIT/NON PROFIT CORPORATION UNIQUE VALET TRASH CORP

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

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Corporate Filing Menu

Help



ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

A	RTICLE II PRIN	CIPAL OFFICE	<u>;</u>
	incipal street address		
· 7295	NW 46 FL 33	5+	
Miami	FL 33	142 ap	to 4
			<u> </u>
			. 100
TICLE III SHA	RES: The number of	shares of stock is	;
ARTICLE IV	INITIAL DIRE	CTORS AND/O	ROFFICERS;
Carlos_	William E	Estrada 7	79/19/5 (B
			,
			<u></u>
	IIAL REGISTERE		
name and Florida s	treet address (PO Bo	x not acceptable)	of the registered age
e name and Florida s	treet address (PO Bo	x not acceptable)	of the registered age
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ename and Floridas CarloS W ZZ9S NV Miami	treet address (PO Bo illiam ES v 46 St fl 33147	x not acceptable) trada	of the registered age PANCIS
ename and Florida s (arlos W 2295 NV Miami	treet address (PO Bo illiam ES y 46 St F1 33147 CORPORATOR: Th	x not acceptable) trada	of the registered age PANCIS

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

Nw/w Estadi 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.

Tator Date

MM 2: 0