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To:

Division of Corporations

3052201440

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 1200000000019 Phone : (305)552-5973

Fax Number : (305)675-5944

**Enter the email address for this business entity to be used for future

Email	Address	١.
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FLORIDA PROFIT/NON PROFIT CORPORATION DENILSON II CORP.

Certificate of Status	0
Certified Copy	1
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Corporate Filing Menu

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JUL 2 0 2022

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LAZARUS CORPORATE

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:
Denilson II CORP.
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address in
8517 SW 147 PL Mami FL 33193
ARTICLE III SHARES: The number of shares of stock is:
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
President MARISOL MATA
The state of the s
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: 3
The name and Florida street address (PO Box not acceptable) of the registered agent is:
MARISOL MATA BOOK
33103 SW 147 PL MISMI FL
ARTICLE VI INCORPORATOR: The name and address of the Incomporator is:
MARISON MATA
33102 DAVA T
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LAZARUS CORPORATE

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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

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.

Incorporator

Date