Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

3052201440

: (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 annual report mailings. Enter only one email address please.

Email Address:___

FLORIDA PROFIT/NON PROFIT CORPORATION KIM ART COLLECTION CORP.

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

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Help



ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

Will F	Art Collection Corp.
	ARTICLE II PRINCIPAL OFFICE:
. -	The principal street address and mailing address is:
422	305# top #306
- W	1 Sw 41 St Apt #206 remar, Fl 33025
 -	
RTICLE III	SHARES: The number of shares of stock is:
ARTICI	E IV INITIAL DIRECTORS AND/OR OFFICERS:
Kimber	In Melean Chacin (EO.
	:
ARTICLE V	INITIAL REGISTERED AGENT AND STREET ADDRESS:
he name and Flo	orida street address (PO Box not acceptable) of the registered agent is
	n Meleon Charin
9227 5	w 41 ST Apt # 206
	mar, FC 33025
	3
ARTICLE VI	INCORPORATOR: The name and address of the Incorporator is
	in Meleon Chatin
9227	SW 41 ST Apt # 206
M	nar, FL 33025

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.

Kimberlin Meleon
Incorporator

08-05-2022

AH 2: 2