Da France of the U3 Electronic Filing Cover Sheet

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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:		
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ON

2 AUG 16 PHII: US

FLORIDA PROFIT/NON PROFIT CORPORATION MIAMI 23 STAFFING CORP

Certificate of Status	0
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Doyal FC 33122

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

ART	TICLE II PRINCIPAL OFFICE:
The princ	cipal street address and mailing address is:
2500 NW 39	Th ave STE 181
Doral FL 3	3312.2
CLE III SHARF	S: The number of shares of stock is:
	INITIAL DIRECTORS AND/OR OFFICERS:
VOELVYS	Percz Pena (P)
	A u
TICLE V INITI	AL REGISTERED AGENT AND STREET ADDRESS
	AL REGISTERED AGENT AND STREET ADDRES eet address (PO Box not acceptable) of the registered age
name and Florida stre	eet address (PO Box not acceptable) of the registered age
name and Florida stre	eet address (PO Box not acceptable) of the registered age
name and Florida stre 106/145 Per 2500 NW 7	eet address (PO Box not acceptable) of the registered age YCF Pena 9 Th ave STE 28/
name and Florida stre 106/145 Per 2500 NAV 79 Doyal FL :	eet address (PO Box not acceptable) of the registered age

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.

tor D

22 AUG 16 PHII: US
SECRETARY OF STATE