age and use it as a cover sheet. Type the fax audit number (shown

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below) on the top and bottom of all pages of the document.



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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 fcr future annual report mailings. Enter only one email address please.\*\*

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## FLORIDA PROFIT/NON PROFIT CORPORATION ENCHANTED BY ARIANNA COMPANY

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Electronic Filing Menu

Corporate Filing Menu

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is: PRINCIPAL OFFICE: The principal street address and mailing address is: 6850 SW 26 Terrace Miami ARTICLE III SHARES: The number of shares of stock is: **INITIAL DIRECTORS AND/OR OFFICERS:** Arianna Ramirez ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is: Kamirez 26 Terrace Miami ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

## 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

PELLED

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SECHETARY OF STATE