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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

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FLORIDA PROFIT/NON PROFIT CORPORATION FLORIDA LIEN, INC.

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

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:Florida Lien, INC.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

2151 NW 7 AVE
MIAMI, FL 33127**ARTICLE III SHARES:** The number of shares of stock is:100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Elisandra Fernandez
(P)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

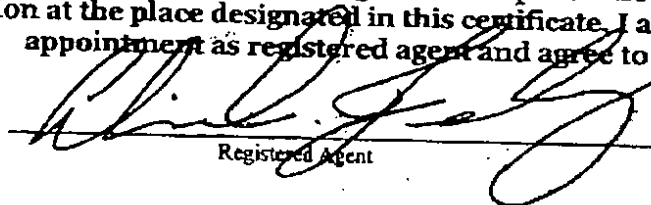
The name and Florida street address (PO Box not acceptable) of the registered agent is:

Elisandra Fernandez
2151 NW 7 AVE MIAMI, FL
33127**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Elisandra Fernandez
2151 NW 7 AVE MIAMI, FL 33127

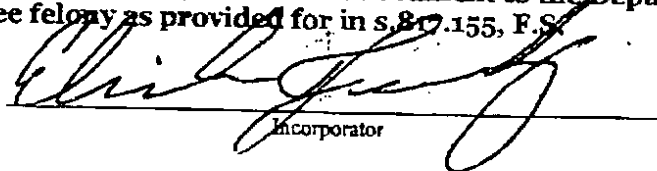
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Required Signatures:

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 9/19/22
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. 87.155, F.S.


Incorporator 9/19/22
Date

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