Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

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: (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.

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FLORIDA PROFIT/NON PROFIT CORPORATION IMPROVE STAR SERVICES INC.

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

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• ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

- Amprove Star Services INC.
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is: 6460 Arthur St Hollywood FL 33004
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
Angelica De La Caridad Perez (P)
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is: FOGELICA PEREZ 6460 Arthur St Holywood FL 33024
ARTICLEVI INCORPORATOR: The name and address of the Incorporator is: Angelica Percz (460 Arthur St Hollywood FL 33024

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

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 \$,817.155, F.S.

Incorporator