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

: (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 RAMIREZ GROUP SERVICES, CORP

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

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Corporate Filing Menu

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

	ARTICLE II PRINCIPAL OFFICE:
	The principal street address and mailing address is:
	3508 NW 114 AVE SUITE 210
	DORAL, FL 33178
ARTICLE III	SHARES: The number of shares of stock is: 100
ARTICL	E IV INITIAL DIRECTORS AND/OR OFFICERS:
	RENIER RAMIREZ ESTRADA - PRESIDENT
	•
ADTICT EV	INITIAL REGISTERED AGENT AND STREET ADDRESS:
	lorida street address (PO Box not acceptable) of the registered agent is
TIR MINIC MALE	RENIER RAMIREZ ESTRADA
	3508 NW 114 AVE SUITE 210
	DORAL, FL 33178
	DORAL, FE 33170
ARTICLEVI	INCORPORATOR: The name and address of the Incorporator is
<u> </u>	RENIER RAMIREZ ESTRADA
	RENIER RAMIREZ ESTRADA 3508 NW 114 AVE SUITE 210

Required Signatures:	
Having been named as registered agent to accept service of corporation at the place designated in this certificate, I am appointment as registered agent and agree to accept service of	
	10/17/2022 Date
Registered Agent	
I submit this document and affirm that the facts stated here the false information submitted in a document to the Depar third degree felony as provided for in s.817.155, F.S.	in are true. I am aware that tment of State constitutes a
incorporator	10/17/2022 Date