10/31/22, 11:20 AM

## Division of Corporations

**Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000371808 3)))



H220003718083ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305)444-4994 Fax Number : (305)328-4774

\*\*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 COMPANY EVERYTHING YOU NEED S'S INC

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

Electronic Filing Menu

Corporate Filing Menu

Help



SPE BOTS 1 AT 3:53

ARTICLE I NAME

To:

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

<u> ERTICLE II PRI</u>			
	NCIPAL OFFICE Principal street address	Mailing address, if different is:	
1624 NE 151 ST			_
NORTH MIAMI BE	ACH FL 33162		
ARTICLE III PUR The purpose for which	<u>tPOSE</u> th the corporation is organized is: <u>ANY AND A</u>	ALL LAWFUL BUSINESS	
<del></del>			
			, ,
IRTICLE IV SHA	ARES		₹.
he number of shares		<u></u>	<b>4</b> €.
	TIAL OFFICERS AND/OR DIRECTORS		
	TIAL OFFICERS AND/OR DIRECTORS  TITLE: STEFANY LORENA PARRA ROJAS (P)	Name and Title:	=
Name and T	itle: STEFANY LORENA PARRA ROJAS (P)		=
Name and T	itle: STEFANY LORENA PARRA ROJAS (P)  1824 NE 151 ST		
Name and T	itle: STEFANY LORENA PARRA ROJAS (P)  1824 NE 151 ST		
Name and T	itic: STEFANY LORENA PARRA ROJAS (P)  1824 NE 151 ST  NORTH MIAMI BEACH, FL 33162		
Name and T Address  Name and Ti	itle: STEFANY LORENA PARRA ROJAS (P)  1824 NE 151 ST  NORTH MIAMI BEACH, FL 33162  tle: SEBASTIAN ESTIDH QUICAZAN AMAYA (VP)	Address:  Name and Title:	
Name and T	itle: STEFANY LORENA PARRA ROJAS (P)  1824 NE 151 ST  NORTH MIAMI BEACH, FL 33162  tle: SEBASTIAN ESTIDH QUICAZAN AMAYA (VP)  1624 NE 151 ST	Address:	
Name and T Address  Name and Ti	itle: STEFANY LORENA PARRA ROJAS (P)  1824 NE 151 ST  NORTH MIAMI BEACH, FL 33162  tle: SEBASTIAN ESTIDH QUICAZAN AMAYA (VP)	Address:  Name and Title:	
Name and T Address  Name and Ti	itle: STEFANY LORENA PARRA ROJAS (P)  1824 NE 151 ST  NORTH MIAMI BEACH, FL 33162  tle: SEBASTIAN ESTIDH QUICAZAN AMAYA (VP)  1624 NE 151 ST	Address:  Name and Title:	
Name and T Address Name and Ti Address	Title: STEFANY LORENA PARRA ROJAS (P)  1824 NE 151 ST  NORTH MIAMI BEACH, FL 33162  tile: SEBASTIAN ESTIDH QUICAZAN AMAYA (VP)  1624 NE 151 ST  NORTH MIAMI BEACH, FL 33162	Address:  Name and Title:  Address:	
Name and T Address Name and Ti Address	TILE: STEFANY LORENA PARRA ROJAS (P)  1824 NE 151 ST  NORTH MIAMI BEACH, FL 33162  ILE: SEBASTIAN ESTIDH QUICAZAN AMAYA (VP)  1624 NE 151 ST  NORTH MIAMI BEACH, FL 33162  ILE: CRISTIAN DAVID RODRIGUEZ REINA (D)	Address:  Name and Title:	
Name and T Address Name and Ti Address	Title: STEFANY LORENA PARRA ROJAS (P)  1824 NE 151 ST  NORTH MIAMI BEACH, FL 33162  tile: SEBASTIAN ESTIDH QUICAZAN AMAYA (VP)  1624 NE 151 ST  NORTH MIAMI BEACH, FL 33162	Address:  Name and Title:  Address:  Name and Title:	

Name and Title:		Name and Title:	
Address		Address:	
	REGISTERED AGENT prida street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name:	STEFANY LORENA PARRA ROJAS		
Address:	1624 NE 151 ST	-	
	NORTH MIAM! BEACH, FL 33162	-	
ARTICLE VII	INCORPORATOR		
	dress of the Incorporator is:		
Name:	STEFANY LORENA PARRA ROJAS		
Address:	1624 NE 151 ST	-	
	NORTH MIAMI BEACH, FL 33162		
ADTICI E VIII	EFFECTIVE DATE:	े पूर स	
	other than the date of filing:	(OPTIONAL)	
(If an effective d	ate is listed, the date must be specific and canno	t be more than five days prior or 90 days after the	
•	invested in this block does not meet the molicible	statutory filing requirements, this date will not be listed as	
	fective date on the Department of State's records.	statutory timing requirements, this trate will that be instead as	
		ယ္	
Having been nan	ed as registered agent to accept service of process formiliar with and accept the appointment as register	or the above stated corporation at the place designated in this sed agent and agree to act in this capacity	
•			
147 0	Required Signaturo/Registered Agent	Date	
I submit this doc	ument and affirm that the facts stated herein are	true. I am aware that the false information submitted in a	
	Department of State constitutes a third degree felon		
/a/ Ste,	fany Lorena Parra Rojas		
Required Signature Indorporator Date			