LAZARUS CORPORATE

PAGE 01/03

· · · · · ·

۱ ---

AH 2: 나나



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.

(((H22000373751 3)))



H220003737513ABC/

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 | : LAZARUS CORPORATE FILING SERVICE, INC. |
|----------------|--|
| Account Number | : I20000000019 |
| 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.

Email Address:_

FLORIDA PROFIT/NON PROFIT CORPORATION CLAUCHARD CORP. PH 4:42 Certificate of Status Certified Copy 2022 : Page Count Estimated Charge

Electronic Filing Menu

Corporate Filing Menu

Help

0

1

03

\$78.75

·

.

·

| | ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit) |
|-------|--|
| | ARTICLE 1 NAME: The name of the corporation is: |
| | CLAUCHAPD CORP. |
| | ARTICLE 11 PRINCIPAL OFFICE: |
| | The principal street address and mailing address is: 10700 NW 6657 + 304 |
| | |
| AKII | CLE III SHARES: The number of shares of stock is: 100 |
| | ARTICLE IV INITIAL DIRECTORS AND/OR OFFICE RS: |
| _ | Claudia Rodriguez (P) |
| , | Richard Fernando Vasquez (VB) |
| | |
| | |
| AR | TICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: |
| | ame and Florida street address (PO Box not acceptable) of the registered agent i |
| | Richard Fernando Vasquez |
| | 10700 NW 665+ #304 |
| | Doral, FL 3317D |
| AR | ICLE VI INCORPORATOR: The name and address of the Incorporator is |
| | |
| | Kiduard Fernando Vasquez |
| | Richard Fernando Vasquez 10700 NW 66st #30f |

| ___

2: 44

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 $s_1 817.155$, F.S.

Incorporator Date