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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I200000000019 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 PENA LOPEZ ELECTRIC SERVICES INC

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

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

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	ARTICLE II PR	UNCIPAL OFF	ICE;			_
The p	rincipal street addr	ess and mailing	address is:			
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ARTICLE III SHA	RES: The number	of shares of stoo	ck is:(O ()		
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ARTICLE IV	INITIAL DI	RECTORS ANI	D/OR OFFICE:	<u>ks:</u>		
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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 familian with and accept the appointment as registered agent and agree to act in this capacity

6 (2)	
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.817.155, F.S.

Incorporator	Date

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