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 Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

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FLORIDA PROFIT/NON PROFIT CORPORATION
TRINITY WS CORP.

Certificate of Status	0
Certified Copy	1
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Second Request

Electronic Filing Menu

Corporate Filing Menu

Help

2022 10 PM 4:32

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

Effective Date 1/1/23**ARTICLE I NAME:** The name of the corporation is:TRINITY WS CORP.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

1075 NE MIAMI GARDENS DR. APT 109W
MIAMI FL 33179**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**ADRIAN EVANDRO MARIN ORDONEZ
(P)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

ADRIAN EVANDRO MARIN ORDONEZ
1075 NE MIAMI GARDENS DR. APT 109W
MIAMI FL 33179**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:ADRIAN EVANDRO MARIN ORDONEZ
1075 NE MIAMI GARDENS DR. APT 109W
MIAMI FL 33179

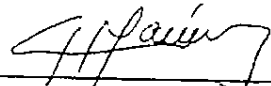
Required Signatures:

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.817.155, F.S.



Incorporator _____ Date _____

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