12/22/2622 17:54 3852201448 LAZARUS CORPORATE PAGE 01/03

## 2 Color Department of Sate 676 Vision of Corporations Electronic Filing Cover Sheet

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Fax Number : (850)617-6381  rom:  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:		Division of Cor	rporations
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.**		rax Number	: (850)617-6381
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FLORIDA PROFIT/NON PROFIT CORPORATION LAATRANSPORT .INC	**(	Enter the email a annual report Email Address	address for this business entity to be used for future mailings. Enter only one email address please. ••  PROFIT/NON PROFIT CORPORATION

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Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

Help



## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

EFFECTIVE DATE 1/1/2023

ARTICLE I NAME: The name of the corporation is:

LAATRANSPORT .INC	
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	
18960 SW 311 ST HOMESTEAD FL 33030	
	_
	<del></del>
ARTICLE III SHARES: The number of shares of stock is: 100	· · · · · · · · · · · · · · · · · · ·
A DOTTION E INC.	~ **
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	`
LUIS ALBERTO ALVAREZ (p)	
	بب 
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDR	RESS:
The name and Florida street address (PO Box not acceptable) of the registered	agent is:
LUIS ALBERTO ALVAREZ	
18960 SW 311 ST HOMESTEAD FL 33030	
	<del></del>
ARTICLE VI INCORPORATOR: The name and address of the Incorpo	rator is:
Luis Al <u>berto Alvarez</u>	
18960 SW 311 ST HOMESTEAD FL 33030	<del></del>

## 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

Sec.	*
Registered Agent	12/12/2022 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.

	12/12/:2022
Incorporator	Date