

Florida Department of State
Division of Corporations
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Division of Corporations
Fax Number : (850)617-6381

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**FLORIDA PROFIT/NON PROFIT CORPORATION
NGUD SERVICES, CORP**

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

The name of the corporation shall be: NGUD SERVICES. CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address
2950 NE 188th ST

UNIT 133

AVENTURA, FL 33180

Mailing address, if different is:

2950 NE 188th ST

UNIT 133

AVENTURA, FL 33180

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: P: NELSON E. URDANETA RINCON

Name and Title: _____

Address: 2950 NE 188th ST

Address: _____

UNIT 133

MIAMI, FL 33155

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J AM 1:23

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: NELSON E. URDANETA RINCON
Address: 2950 NE 188th ST. UNIT 133
AVENTURA, FL 33180

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: NELSON E. URDANETA RINCON
Address: 2950 NE 188th ST. UNIT 133
AVENTURA, FL 33180

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 04/28/2023 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

X Nelson Urdaneta _____ 04/28/2023
Required Signature/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.

X Nelson Urdaneta _____ 04/28/2023
Required Signature/Incorporator Date