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To:

Division of Corporations

Fax Number : (850)617-5381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 : (305)552-5973

: (305)675-5944 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please."\*

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## S

## FLORIDA PROFIT/NON PROFIT CORPORATION SUAREZ PAYROLL SERVICES CORP.

Certificate of Status	0	
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3052201440

## ARTICLES OF INCORPORATION

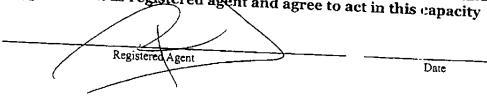
In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is: ARTICLÉ U PRINCIPAL OFFICE: The principal street address and mailing address is: ARTICLE III SHARES: The number of shares of stock is: \_\_\_\_ INITIAL DIRECTORS AND/OR OFFICERS: INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is: INCORPORATOR: The name and address of the Incorporator is:

## Required Signatures:

3052201440

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



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.

Indeprovator Date

2023 JUN -5 PM 2:51 SECRETANN OF STATI