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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

\*\*Enter the email address for this business entity to be used for future—
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 Address:		
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## FLORIDA PROFIT/NON PROFIT CORPORATION CALZADO INVESTMENTS, INC

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

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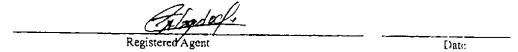
## ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE 1	NAME:	The name o	of the corp	poration	is:
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CALZADO INVESTMENTS, INC	
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	
8600 NW SOUTH RIVER Dr	<del></del>
Suite 118	
Medley, FI 33166	
·	
ARTICLE III SHARES: The number of shares of stock is:	·
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICE	PS:
AIFREDO CALZADO (TARCIA (P)	SLUSIU
Alt KEDO CALZADO LIANCIA (1)	
	<u> </u>
	<del></del>
	•
ARTICLE V INITIAL REGISTERED AGENT AND STREET A	DDRESS:
The name and Florida street address (PO Box not acceptable) of the regist	ered agent is:
ALFREDO CALZADO GARCIA	·
8600 NW SOUTH RIVER DR SUITE	118
MEDLEY, FL 33166	
ARTICLE VI INCORPORATOR: The name and address of the In	corporator is:
ALFREDO CALZADO GARCIA	
8600 NW SOUTH RIVER DR Suite	118
MeDLey, F1 33166	

## 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



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: