

10/13/2023 14:44 305 201 40 LAZARUS CORPORATE FILING SERVICE PAGE 01/03  
**P23000073516**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H23000359524 3)))



H230003595243ABC0

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

RECEIVED  
2023 OCT 13 PM 3:08  
DIVISION OF CORPORATIONS  
FLORIDA DEPARTMENT OF STATE

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

From:

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: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION  
LUXURY SURFACE SOLUTIONS CORP**

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

Electronic Filing Menu

Corporate Filing Menu

Help

2023 OCT 13 11:12:30

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

**ARTICLE I NAME:** The name of the corporation is:

LUXURY SURFACE SOLUTIONS CORP

**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

657 SE 31St Ave Homestead FL 33033

**ARTICLE III SHARES:** The number of shares of stock is: 100

**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

SOFIA A. FRIAS (P)

**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

SOFIA A. FRIAS

657 SE 31St Ave. Homestead FL 33033

**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:

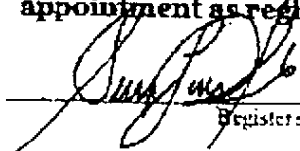
SOFIA A. FRIAS

657 SE 31St Ave. Homestead FL 33033

2023 OCT 13 PM 12:35

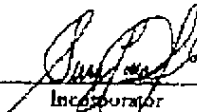
**Required Signatures:**

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

10/12/2023  
\_\_\_\_\_  
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

10/12/2023  
\_\_\_\_\_  
Date

2023 OCT 13 Fri 12:35  
10/12/23 3:04 PM