Electronic Filing Cover Sheet



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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 WILLGLOBALL SOLUTIONS CORP

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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)

ARTICLE 1 NAME: The name of the corporation is:

·		INCIPAL O	. –		
	icipal street addr	_			
11461 Loko	Side Drive	apt 42	04 D.	oerl	FL 3
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TCLE III SHAR	ES: The number	oi shares of si	OCK 1S:	100	
ARTICLE IV	INITIAL DIR	ECTORS A	VD/OR OF	FICERS:	
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RTICLE V INITI	AL REGISTER	ED AGENT	AND STRE	ETADD	RESS:
name and Florida stre	et address (PO B	ox not accept	able) of the	registered	agent is:
Humberto Vic	ton CANSI	No S	nluestre		
11461 LaKoSIDI	c Dave	apt 4200	2 Done	<u>o/</u> F	FL 331
TICLE VI INCO	RPORATOR: T	he name and	address of t	he Incorpo	orator is:
			Silvestre		

Required Signatures:

Having been named as registered agent to accept se corporation at the place designated in this certificate	te. I am familiar with and accent the
appointment as registered agent and agr	ree to act in this capacity
Sohren	
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.

Incorporator

Date

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