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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 onnual report mailings. Enter only one email address please.\*\*

Email Address:\_\_\_\_\_

## FLORIDA PROFIT/NON PROFIT CORPORATION THE SPARKLY BROS CORP

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

Electronic Filing Menu

Corporate Filing Menu



5/28/24

PAGE 02/03

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

	<b>ARTICLE I</b> NAME: The name of the corporation is:	
	the sparkly bros coil	
	ARTICLE II PRINCIPAL OFFICE:	
	The principal street address and mailing address is:	
	275 E 7 5+	
	Higleah Fl 33010	
	THE III CHARES. The number of chares of stock is:	
RTK	CLE III SHARES: The number of shares of stock is:	
	ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	
	Omal 59/95 (P)	
		` <b>]</b>
		T
		્
		-
AR	TICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:	T.
The n	ame and Florida street address (PO Box not acceptable) of the registered agentis:	, <u>-</u>
(	Omas Salas	
	275 6 7 St	
-	Higlegh, Fl, 3301.0	
	Highean, 10, 33010	
=	The same of the Incompanies	
ART	ICLE VI INCORPORATOR: The name and address of the Incorporator is:	
	onal 59/9S	
_	275 E 7 St	
	Hickorh FL 33010	

## 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
appointmentas registered agent and agree to act in this capacity

0 mas	59/95	
 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.

Omar Salas
Incorporator Date

THE STATE OF STATE