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FLORIDA PROFIT/NON PROFIT CORPORATION LLM INSURANCE CORP

Certificate of Status	0
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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:		
LLM Insurance Corp		
ARTICLE II PRINCIPAL OFFICE:		
The principal street address and mailing address is:		
15901 NW 27/h Place Migni		
GAYDENS FL 33054		
ARTICLE III SHARES: The number of shares of stock is:		
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:		
YINE (by LIZ MORA les SANCHEZ SE TO		
TO T		
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:		
The name and Florida street address (PO Box not acceptable) of the registered agent is:		
YINELBY LIZ MORALES SANCHEZ.		
1590 (NW 2716 PLACE MIAMI GAVGENS FL 33054		
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:		
YINELBY LIZ MOVALES SANCHEZ		
YINELBY LIZ MOVALES SANCHEZ. 15901 NW 27th PLACE MIGHT GANGENS EL 33054		

EIN: 99-3272345

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 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

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