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H240001911103ABCT

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Account Number : I20230000151 Phone : (305)595-2407 Fax Number : (305)595-2408

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	Daytime	Telephone number	-		
	ARIAQUIROS9@HOTMAIL.COM				
MA		ed for future annual report	natification		

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

<u> LE II PRINCI</u>			
	rincipal <u>street</u> address	Mailing addr	ess, if different is:
SW 143 AVE			
11, FLORIDA 331	77		
CLE III PURPO:			
rpose for which the	e corporation is organized is:ANY AN	D ALL LEGAL PURPOSES	
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LEIV SHARE	<u>S</u> 100 tock is:		
CLE IV SHARE mber of shares of s	<u>\$</u> tock is:		
LE V INITIAL	. OFFICERS AND/OR DIRECTORS		
LE V INITIAL	. OFFICERS AND/OR DIRECTORS SUMAILY DIAZ PINO, PRES	Name and Title:	
LE V INITIAL	OFFICERS AND/OR DIRECTORS SUMAILY DIAZ PINO, PRES 15301 SW 143 AVE	Name and Title:	
Name and Title:	SUMAILY DIAZ PINO, PRES 15301 SW 143 AVE MIAMI FLORIDA 33177	Name and Title:Address:	
Name and Title:	SUMAILY DIAZ PINO, PRES 15301 SW 143 AVE MIAMI FLORIDA 33177	Name and Title:Address:	
Name and Title:	SUMAILY DIAZ PINO, PRES 15301 SW 143 AVE MIAMI FLORIDA 33177	Name and Title:Address:	
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Address: SUMAILY DIAZ PINO ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: SUMAILY DIAZ PINO Address: Address: Address: ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: SUMAILY DIAZ PINO Address: Address: ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of liting: D5/30/2024 (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Having been named as registered agent to accept survice of process for the above stated corporation at the place designated in this corrificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Required Signature/Registered Agent I submit this document and offirm 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 fellony as provided for in s.817.155, F.S. Required Signature/Incorporator Date C6/03/2024 Required Signature/Incorporator	Name a	nd Title; A	lame and Title:	-
ARTICLE VII REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: SUMAILY DIAZ PINO Name: Address: MIAMI FLORIDA 33177 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: SUMAILY DIAZ PINO Address: MIAMI FLORIDA 33177 ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (15 an effective date, if other than the date of filing): Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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 Required Signature/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 Section of the degree of the submitted of the submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S O6/03/2024			Address:	
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SUMAILY DIAZ PINO Address: 15301 SW 143 AVE	ARTICLE VI	REGISTERED AGENT		
Name: Address: 15301 SW 143 AVE	The name and f		registered agent is:	
Address: MIAMI FLORIDA 33177 The name and address of the incorporator is: Name: SUMAILY DIAZ PINO Address: MIAMI FLORIDA 33177 ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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 Required Signature/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. O6/03/2024 Required Signature/Registered felony as provided for in s.817.155, F.S. O6/03/2024	Name:	SUMAILY DIAZ PINO		
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Required Signature / Incorporator				
Required Signature / Incorporator	Sol			06/03/2024
	Required Signati	pre/Incorporator	Date	