Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000080019 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.

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FLORIDA PROFIT/NON PROFIT CORPORATION LUIS OIL CORP

Certificate of Status	0
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Estimated Charge	\$78.75

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Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

	ARTICLE II PRINCIPAL OFFICE:
	The principal street address and mailing address is:
	15245 SW 8Th WAY MIAM (EL 33194
RTI	CLE III SHARES: The number of shares of stock is:
	ARTICLE IV INITIAL DIRECTORS AND/OR OFFICE RS:
	Yoswien Luis Min (P)
_	
AR	TICLE V INITIAL REGISTERED AGENT AND STREET ADDRE
ie n	ame and Florida street address (PO Box not acceptable) of the registered ag
	YOSNIEN LUIS MIN
	15245 SW 8Th WAY
	15245 SW 814 WAY
	MIAMI FL 33194
	MIAMI FL 33194
	ICLEVI INCORPORATOR: The name and address of the Incorporate
	MIAMI FL 33194

EIN: 99-3703757

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 Date