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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 annual report mailings. Enter only one email address please.

Email	Address:		
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FLORIDA PROFIT/NON PROFIT CORPORATION H SERVICES MANAGEMENT CORP

Certificate of Status	0		
Certified Copy	1		
Page Count	03		
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Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

H Services Management (Orp

ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	
18807 SW 113TH CT	
M[AMI FL 33157	_
ARTICLE III SHARES: The number of shares of stock is: 100	<u> </u>
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	
HUMBERTO GONZALEZ MORA (P)	
	
The name and Florida street address (BO Bournet same table) of the same table.	
The name and Florida street address (PO Box not acceptable) of the registered a	_
HUMBERTO GONZALEZ MORA	
18807 SW 113TH CT	<u></u>
MIAMI FL 33157	
ARTICLE VI INCORPORATOR: The name and address of the Incorpora	
18807 SW 113TH CT	
TOUCH SAM LISTUCE	

SECRETARY OF LIATE IVISIONETARY OF LIATE

MIAMI FL 33157

Required Signatures:

Having been named as registered agent to accept service of corporation at the place designated in this certificate, I are appointment as registered agent and agree to a	n tamilia	r with and	ı accept me
1200	.)	(¬	

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.

07 - 17 - 2024 Date