

## Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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**P240003279633ABC3**

10-1-24



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## To:

Division of Corporations  
Fax Number : (850)617-6381

## From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
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Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**ADLT SERVICES CORP**

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

RECEIVED  
2024 SEP 30 AM 10:09  
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TALLAHASSEE, FL

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Corporate Filing Menu

Help

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 (Profit)

**ARTICLE I NAME:** The name of the corporation is:ADLT SERVICES CORP**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

1750 NW 107TH AVE NORTH MEZZ  
OFF NM2 MIAMI FL 33182**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**GERENCIO RAUL FARINAS CAPOTE  
(P)2013 SEP 30 PM 3:40  
STATE  
FL**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

GERENCIO RAUL FARINAS CAPOTE  
1750 NW 107TH AVE NORTH MEZZ  
OFF NM2 MIAMI FL 33182**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:GERENCIO RAUL FARINAS CAPOTE  
1750 NW 107TH AVE NORTH MEZZ  
OFF NM2 MIAMI FL 331822013 SEP 30 PM 3:40  
STATE  
FL

EIN: 99-5120429

**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

GFC.

Registered Agent

9-26-24

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.

GFC.

Incorporator

9-26-24

Date