Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

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FLORIDA PROFIT/NON PROFIT CORPORATION LUXURY SERVICES INC #2

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

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is: LUXURY SORVICES INC #2 ARTICLE II PRINCIPAL OFFICE: The principal street address and mailing address is: **ARTICLE III** SHARES: The number of shares of stock is: INITIAL DIRECTORS AND/OR OFFICERS ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is: **ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is: Bernudez 2461 SW 117ct

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 Algent 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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SECRETARY OF STATE

O) TALLAMASSEE, FATE