

P25000002543

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 : I20000000019
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: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
APOSTULADO DE EMAUS CORP**

| | |
|-----------------------|---------|
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CORPORATE FILING

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:Apostulado de EMAUS Corp**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

16900 SW 92 ave, Palmetto Bay
FL, 33157**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Salvador Villegas (P)

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ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

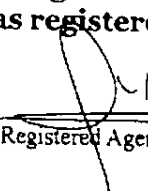
The name and Florida street address (PO Box not acceptable) of the registered agent is:

Salvador Villegas
16900 SW 92 ave, Palmetto Bay
FL, 33157**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Salvador Villegas
16900 SW 92 ave, Palmetto Bay
FL, 33157

EIN: 33-2804831

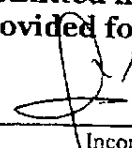
Required Signatures:

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

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