

H21000018163

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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FLORIDA PROFIT/NON PROFIT CORPORATION
INVERSIONES CARDOLAB, INC

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

RECEIVED
2021 FEB 26 PM 4:34
DIVISION OF CORPORATIONS
COMMERCIAL
REGISTRATION SERVICES

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: INVERSIONES CARDOLAB, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address
10726 SW 147th CT

Mailing address, if different is:
10726 SW 147th CT

MIAMI, FL 33196

MIAMI, FL 33196

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

21 FEB 26 4 54 PM '21

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: P: MARIA MARTINEZ

Name and Title: _____

Address 10726 SW 147th CT

Address: _____

MIAMI, FL 33196

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

| | | | |
|-----------------|-------|-----------------|-------|
| Name and Title: | _____ | Name and Title: | _____ |
| Address | _____ | Address: | _____ |
| | _____ | | _____ |
| | _____ | | _____ |

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: MARIA MARTINEZ

Address: 10726 SW 147th CT

MIAMI, FL 33196

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MARIA MARTINEZ

Address: 10726 SW 147th CT

MIAMI, FL 33196

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 02/23/2021. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

X *Maria Martinez* 02/23/2021

Required Signature/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.

X *Maria Martinez* 02/23/2021

Required Signature/Incorporator Date