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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
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SECRITARY OF STATE TO STATE TO

FLORIDA PROFIT/NON PROFIT CORPORATION INNOVATION GROUP ADVANCED SERVICES INC

Certificate of Status	1
Certified Copy	0
Page Count	03
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2024 JULY 17 PM 5: 10

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

	ARTICLE II PRINCIPAL OFFICE:
	The principal street address and mailing address is:
	8785 SW 165 DVC
	WIDMIF1. 33193 #2007
ART	TICLE III SHARES: The number of shares of stock is: /00
	ARTICLE IV INITIAL DIRECTORS AND/OR OFFICE IS:
_	Liobel Negnin RoviRA (P
_	26720 SW 142 AVE
	Homesterd FL 3303
<u> </u>	
Al	RTICLE V INITIAL REGISTERED AGENT AND STREET ADDRE
The	name and Florida street address (PO Box not acceptable) of the registered ag
_	Liobel Negrin Rovira
_	26720 SW 142 DUC
	Homestend FL 33032
AR	IICLE VI INCORPORATOR: The name and address of the Incorporat

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 7-17-2024

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