

Florida Department of State

Division of Corporations

Florida Profit/Non Profit Corporation Filing Cover Sheet

P25000001230

1.9.25

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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
SOLDERING SOLUTIONS INC**

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

25 JAN - 8 AM 12: 37

FILED
SECRETARY OF STATE
CORPORATION DIVISION

RECEIVED

2025 JAN - 8 AM 9: 00

SOLARIS DATE
SOLARIS DATE

Electronic Filing Menu

Corporate Filing Menu

Help

Second Request

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

Soldering Solutions inc

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

11822 SW 246 Th Ln Homestead
FL 33032

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Eric Landy Morales Garcia - P

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Eric Landy Morales Garcia
11822 SW 246 Th Ln Homestead
FL 33032

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

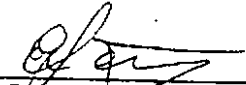
Eric Landy Morales Garcia
11822 SW 246 Th Ln Homestead
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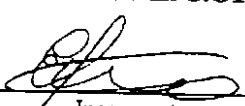
Required Signatures:

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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