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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 12000000019 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.

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FLORIDA PROFIT/NON PROFIT CORPORATION **LAIRDMAN INC**

Certificate of Status	0
Certified Copy	1
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Help



ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:
LAGREMAN INC
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is: 780 VE 174 Shelt Mismi F1 33167
ARTICLE III SHARES: The number of shares of stock is: 10 ()
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS: CARIOS Ado to PASTRAMA (P)
ARTICLE V INITIAL REGISTERED AGENT AND STREET AUDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:
CARIOS Adolfo PASTRANA
780 NF MUIN Short
Miami El 33162
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
CARIOS Adolfo PASTRANA
750 NE 174th Street
Mian: F1 23/62

EIN: 33-2984597

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 Ageo

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 1/22/25