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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 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.\*\*

<b>Email</b>	Address:	

## FLORIDA PROFIT/NON PROFIT CORPORATION NDA MASTER PIPE ENTERPRISE CORP

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

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

**ARTICLE I** NAME: The name of the corporation is:

	ARTICLE II PRINCIPAL OFFICE:	
The	e principal street address and mailing addre	ess is:
10431 SW 150th Str	eet	
Miami <u>, FL 33176</u>		•
ARTICLE III SI	HARES: The number of shares of stock is:	100
ARTICLE I	V INITIAL DIRECTORS AND/OR	
President : YUNIER RA	AMOS RODRIGUEZ 100	2021 OCT
10431 SW 150 STREE	Τ	133
Miami <u>. FL 33176</u>		: 3
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		· 23
	NITIAL REGISTERED AGENT AND ST	
The name and Florid	a street address (PO Box not acceptable) of	the registered agent is
YUNIE <u>R RAMOS ROD</u>	RIGUEZ	
10431 <u>SW 150 STREE</u>	<u>T</u>	
Miami, <u>FL 33176</u>		
ARTICLE VI U	NCORPORATOR: The name and address	of the Incorporator is
YUNIER RAMOS R	ODRIGUEZ	
10431 SW 150 STR	EET	····
MIAMI FL 33176		

## 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

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.