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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : GERALD WEINBERG, P.C.
Account Number : I20030000043
Phone : (800)342-9856
Fax Number : (800)354-3381

****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
REPLACEMASTER MIAMI INC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

SECRETARY OF STATE
TALLAHASSEE, FL

2024 NOV -4 PM 3:04

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2024

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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:

Replacemaster Miami Inc

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

Mailing address, if different is:

20201 E Country Club Drive Apt 1204
Aventura, FL 33180

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Construction Consulting

ARTICLE IV SHARES

The number of shares of stock is:

200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Rachel Dimitro (Vice Pres)

Name and Title:

Robert Dimitro Pres

Address:

20201 E Country Club Drive Apt 1204
Aventura, FL 33180

Address:

20201 E Country Club Drive Apt 1204
Aventura, FL 33180

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

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Name and Title: _____ Name and Title: _____
 Address: _____ Address: _____
 Name: _____

ARTICLE VI REGISTERED AGENT

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

Name: Robert Dimitro
 Address: 20201 E Country Club Drive Apt 1204
Aventura, FL 33150

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Lawrence A. Kirsch
 Address: 41 State St. Ste 700
Albany, NY 12207

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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

The name: Robert Dimitro 11/4/2024
 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.

Lawrence A. Kirsch 11/4/24
 Required Signature/Incorporator Date

ARTICLE IX

The name: