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Division of Corporations

Fax Number : (850)617-6381

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Account Name : BUSINESS WORLD TRANSACTIONS,

Account Number : 104512000707 Phone : (305)803-2736

: (305)391~2286 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one omail address please.

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FLORIDA PROFIT/NON PROFIT CORPORATION MS LIQUIDATORS, CORP.

Certificate of Status	0
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SECRETARY OF STATE TALLAHASSEE. FLORIDA

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I

The name of the corporation shall be: MS LIQUIDATORS, CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

12315 S.W. 151 STREET #106 D MIAMI, FL. 33186

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:One Thousand (1,000) shares of One Dollar (\$1.00) par value common stock, which shall be designated #COMMON SHARES.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

OLGA A. CARRION 12315 S.W. 151 STREET #106 D MIAMI, FL. 33186

Prepared By: OLGA A. CARRION

12315 S.W. 151 STREET #106 D

MIAMI, FL. 33186 702 666-3843

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ARTICLE V INCORPORATOR(S) SECRETARY OF STATE TALLAHASSEE, FLORIDA

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(arc):

OLGA A. CARRION 12315 S.W. 151 STREET #106 D MIAMI. FL. 33186

DIRECTOR & PRESIDENT

he undersigned incorpor	rator(s) has(have) executed these Articles of Incorporation this
13 day of	, 2011.
	Signature Combin
	_ (deg corner
	Signature 🔾
	Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

Signature

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11 OCT 20 AM 10: 28

SECRETARY OF STATE TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the corporation is: MS LIQUIDATORS, CORP.
- 2. The name and address of the registered agent and office is:

OLGA A. CARRION 12315 S.W. 151 STREET #106 D MIAMI, FL. 33186

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(SIGNATURE) (DATE)