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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.\*\*

Email	Address	·	 	 	

## FLORIDA PROFIT/NON PROFIT CORPORATION MA MEJOR INC

Certificate of Status	0
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Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

MAY 1 2 2017

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## ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:	
Ha Mejor inc	
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	
4058 SW 156 Ct Hiani FL 33185	
7500	
ARTICLE III SHARES: The number of shares of stock is: 160	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	
ANA Ibis tomas (P)	
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:	
The name and Florida street address (PO Box not acceptable) of the registered agent is:	
Ang Ibis Tomas	7 HA
4058 SW 156 CT	7
Miami FL 33/85	
	ö == i
ARTICLE VI INCORPORATOR: The name and address of the Incorporator	: <u> </u>
Ang Ibis Tomas	
4058 SW 156 CT	

FL

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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 pegistered agent and agree to act in this capacity

Registered Agent

fcorporator

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.

Date

THAY IT AM 9: 47