

TRANSMITTAL LETTER

P000000094859

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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-10/06/00--01145--002
*****78.75 *****78.75

SUBJECT: MC + MB 1
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00 Filing Fee
☐ \$78.75 Filing Fee
& Certificate of Status

☒ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: MICHAEL CUEVAS
Name (Printed or typed)

10446 SW 16TH ST
Address

PEMBROKE PINES, FL 33026
City, State & Zip

(561) 714-4434
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

CB 10-9

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: MC & MB 1, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
10446 SW 16TH ST Pembroke Pines, FL 33025

ARTICLE III SHARES

The number of shares of stock this corporation is authorized to have outstanding at any one time is: 100 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Michael Cuevas

10446 SW 16TH ST. Pembroke Pines, FL 33025

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are :

Michael Cuevas

10446 SW 16TH ST Pembroke Pines, FL 33025.



Signature/Incorporator



Date

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/Incorporator



Date