

P.11000012816

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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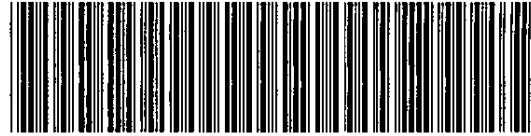
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
2011 FEB -4 PM 2:43

2/7/11

COVER LETTER

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

SUBJECT: CMacias, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Rose Macias

Name (Printed or typed)

1624 S W 29th Ave

Address

Ft Lauderdale, Fla 33312

City, State & Zip

954-584-8710

Daytime Telephone number

rosemacias3@gmail.com

E-mail address: (to be used for future annual report notification)

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

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

CMacias, Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

1624 S.W. 29th Ave

Ft Lauderdale, Fla

33312

Mailing address, if different is:

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ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Specific purpose is for a Professional Corporation

ARTICLE IV SHARES

Five Hundred, (500) shares of common stock, with a par value of One Dollar (\$1.00) per share, as fixed by the Board of Directors of this Corporation

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Carlos M. Macias, President

Address: 1624 S.W. 29th Ave

Ft Lauderdale, Fla 33312

Name and Title: _____

Address: _____

Name and Title: Rose Macias, Secretary-Treasurer

Address: 1624 S.W. 29th Ave

Ft Lauderdale, Fla 33312

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Carlos M. Macias

Address: 1624 S.W. 29th Ave

Ft Lauderdale, Fla 33312

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Carlos M. Macias

Address: 1624 S.W. 29th ave

Ft Lauderdale, Fla 33312

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



Required Signature/Registered Agent

Feb. 01, 2011

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.



Required Signature/Incorporator

Feb. 01, 2011

Date