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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

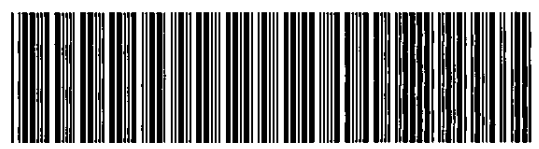
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FL 32301

SC
7-20-11

COVER LETTER

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

SUBJECT: M.G. Vera, 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: Maria T. Vera c/o M.G. Vera, Inc.

Name (Printed or typed)

13960 S.W. 40th Terrace

Address

Miami, Florida 33175

City, State & Zip

305-221-6210

Daytime Telephone number

mtvera@mgvera.com

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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

ARTICLE I NAME M.G. Vera, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address: 13960 S.W. 47th Street
Miami, Florida 33175
Mailing address, if different is: _____

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
To engage in any activity or business permitted and lawful under the laws of the United States and the State of Florida.

ARTICLE IV SHARES
The number of shares of stock is: 1000 Shares of common stock each share having the par value of One (\$1.00) Dollar.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Maria T. Vera</u>	Name and Title: _____
Address: <u>13224 S.W. 40th Terrace</u>	Address: _____
<u>Miami, Florida 33175</u>	_____
_____	_____
Name and Title: <u>Manuel G. Vera, Jr.</u>	Name and Title: _____
Address: <u>3790 S.W. 108th Avenue</u>	Address: _____
<u>Miami, Florida 33165</u>	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Name: Maria T. Vera
Address: 13224 S.W. 40th Terrace
Miami, Florida 33175

ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:
Name: Maria T. Vera
Address: 13224 S.W. 40th Terrace
Miami, Florida 33175

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
Date: July 14, 2011

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
Date: July 14, 2011

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SECRETARY OF STATE
FLORIDA