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(((H130002340873)))



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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

: PADRO AND COMPANY, P.A. Account Name

Account Number : I20050000094

Phone Fax Number : (305)500-9361 : (305)500-9492

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

FLORIDA PROFIT/NON PROFIT CORPORATION MAJESTIC PH 304, INC.

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Helz 30/22/13 H 13 000 23 40873
ARTICLES OF INCORPORATION

	In compliance with Chapter 607	and/or Chapter 621, F.S. (Profit)	CIO CAPORAIN
	NAME	•	OCT 22 AM 10: 41
The name of the con	poration shall be: MAJESTIC PH 304, Inc.		"'/O:4,
	PRINCIPAL OFFICE		7./
	Principal atreet address	Mailing addre	ess, if different is:
_	20 NW 97 Ave, Suite 120,		
<u>M</u> I	ami. FL 33172		
ARTICLE III	PURPOSE		
	ich the corporation is organized is:		
All lawful business	activities		
ADDIOT TO TTY	CYY4 DRG		
ARTICLE IV :			
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	<u>ors</u>	
Name and Tit	c: Jose Patriclo Daire P/D	Name and Title:	
Address: _	2520 NW 97 Ave. 120	Address:	
	Mami. FL 33172		
Name and Titl	e:		
Address:		Address:	
Name and Titl	le:	Nama and Title:	
Address:		Address:	
		-	
	REGISTERED AGENT		
Name:	da street address (P.O. Box NOT acceptable) Jose F. Padro	of the registered agent is:	
Address:	2520 NW 97 Ave, Suite 120,	-	
riddiess.	Miami, FL 33172		
			
	NCORPORATOR		
	ess of the Incorporator is:		
Name: Address:	Jose F. Padro 2520 NW 97 Ave. Suite 120.		
Mulichs.	Miami. Fl. 33172		
			
Having heen named this certificate, I am	l as registered agent to accept service of prot familiar with and accept the appointment as t	ess for the above stated corporation of the corpora	on at the place designated in this capacity
1	T Vader		. 1 1-
-+00/	Required Signature/Registered Agent		10 21 13
	Required Signature/Registered Agent		Date
l submit this docum document to the Den	ient and offirm that the facts stated herein a partment of State constitutes a third degree fel	ere true. I am aware that the false ony as provided for in s.817.155. P	e information submitted in a S.
		The state of the s	 ·
\rightarrow	us F Vader		10/2.1.2
	Required Signature/Incorporator		Date