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Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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**FLORIDA PROFIT/NON PROFIT CORPORATION
MG 922 SERVICE CORP**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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Electronic Filing Menu

Corporate Filing Menu

Help

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

ARTICLE I NAME MG 922 SERVICE CORP
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
Principal street address Mailing address, if different is:
11401 NW 89 ST _____
APT 214 _____
MIAMI, FL 33178 _____

ARTICLE III PURPOSE ANY AND ALL LAWFULL BUSINESS
The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES 100
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	MARIANA DAS LARANJEIRAS(P)	Name and Title:	_____
Address	11401 NW 89 ST	Address:	_____
	APT 214		_____
	MIAMI, FL 33178		_____

Name and Title:	GUILLERMO DA SILVA(V/P)	Name and Title:	_____
Address	11401 NW 89 ST	Address:	_____
	APT 214		_____
	MIAMI, FL 33178		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____
	_____		_____

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ALLAHASSEE, FLORIDA

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: MARIANA DAS LARANJEIRAS
Address: 11401 NW 89 ST APT 214
MIAMI, FL 33178

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: MARIANA DAS LARANJEIRAS
Address: 11401 NW 89 ST APT 214
MIAMI, FL 33178

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

06/01/2015

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

06/01/2015

Date

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