

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

P/1600007822920

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000078229 3)))



H160000782293ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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

Email Address: _____

RECEIVED

16 MAR 29 PM 4:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**FLORIDA PROFIT/NON PROFIT CORPORATION
NELSON DON A/C SERVICE AND REPAIR INC**

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

16 MAR 29 AM 11:21

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03/30/16

H160000/8229

ARTICLES OF INCORPORATION

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

ARTICLE I NAME: The name of the corporation is:NELSON DON A/C SERVICE AND Repair INC**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

16235 NW 83 CT
MIAMI LAKES, FL 33016**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**NELSON DON (PRESIDENT)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

NELSON DON
16235 NW 83 CT
MIAMI LAKES, FL 33016**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:NELSON DON
16235 NW 83 CT
MIAMI LAKES, FL 33016FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 MAR 29 AM 11:21

H16000078229

H16000078229

Required Signatures:

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

Registered Agent 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.

Incorporator Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 MAR 29 AM 11:21

H16000078229