

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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.

(((H16000172422 3)))



H160001724223ABCZ

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: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
MAINTENANCE AND REPAIR CORP**

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

JUL 19 2016

T. SCOTT

H 16000172422

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

Maintenance and Repair Corp

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

6674 SW 138 ct

Miami FL 33183

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Marialina Agreda — President

Jose A. Agreda — Vice President

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Marialina Agreda

6674 SW 138 ct

Miami FL 33183

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Marialina Agreda

6674 SW 138 ct

Miami FL 33183

16 JUL 18 AM 10:23

H 16000172422

07/18/2016 14:23
Jul 18 16 10:51a

3052201440

LAZARUS

7853346486

PAGE 03/03

p.3

H16000172422

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

07-18-16
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

07-18-16
Date

H16000172422