Division of Corporations **Electronic Filing Cover Sheet**

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FLORIDA PROFIT/NON PROFIT CORPORATION INDAL INDUSTRIES, INC.

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2016 NOV -8 PM 2: 29

	ARTICLES OF INC	ORPORA d/or Chap	ATION Ner 621, P.S. (Profit) J. HARY JE STATE TALLIAHASSEE, FLORIO		
ARTICLE I NAME The same of the corporat	ion shall be:		MULHINABELITEONIO		
RTTCLE II PRINCIPAL OPFICE Principal street address			Mailing address, if different is:		
8435 NW 118th Path Doral, FL 33178		•	Same		
ARTICLE III PURPO The purpose for which the	ne corporation is organized is:		transact any and		
ARTICLE V INITIA	RASS NW 113th Path		and Title:		
Name and Title:			ess:		
Name and Title:		Namo	and Titio:		
Address		Addr	585:		

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Name a	nd Title:	Name and Title 1 1000	Y LE STARE FELFLORIDA
Addres	SS	Address:	
	REGISTEREO AGENT Plorida street uddress (P.O. Box NOT acceptable)	e) of the registered event is:	
Name:	Paul L. Glance	e) of the regarded rigon is:	
Address:	9100 NW 36 Street, #105	<u> </u>	
	Doral, FL 33178	,	
			
ARTICLE VII	INCORPORATOR		
The name and	address of the Incorporator is:		
Name:	Mario A. Carrasco		
Address:	8435 NW 113th Path		
	Doral, FL 33178	·	
Effective date	I EFFECTIVE DATE: if other than the date of filing:	, (OPTIONAL)	
(If an effective filling.)	date is listed, the date must be specific and co	unnot be more than five days prior	r or 90 days after the
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the document's	effective date on the Department of State's reco	rds.	
Having been no this certificate,	amed as registered again to accept service of pro I am familiar with and accept the appointment o	overs for the above stated corporations registered agent and agree to act i	on at the place designated in in this cupacity
1	1 1 16 -		11/7/16
160	A L Mence Required Agent		Date
I submit this d	ocument and affirm that the fucis stated herela	are true. I am aware that the fulsi	e information submitted til o
avcionent fo fil	e Department of State constitutes a third dugree ر	jelony as provided for in \$.817.155,	
	14600		11/7/16
Rog	juired Signature/Incorporator		' Date

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