

**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.**

((H17000115872 3)))



H170001158723ABC%

**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**  
**MHN NOTICIAS CORP**

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

Electronic Filing Menu

Corporate Filing Menu

Help

APR 27 2017

17 APR 27 PM 4:09

LAZARUS  
 CORPORATE FILING SERVICE

17 APR 27 PM 4:20

SEVEN  
 APRIL  
 2017

H17000115872

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 (Profit)

**ARTICLE I NAME:** The name of the corporation is:MHN NOTICIAS CORP**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

9820 SW 49 STMIAMI, FL. 33165**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**PEDRO LOPEZ PRESIDENTHECTOR VALLE FALCON VICE PRESIDENTBRODERICK ZERPA VICE PRESIDENTMARIANELLA CARRILLO 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:

PEDRO LOPEZ9820 SW 49 ST.MIAMI, FL. 33165.**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:PEDRO LOPEZ9820 SW 49 ST.MIAMI, FL 33165

H17000115872

04/27/2017 15:40

3052201440

LAZARUS

PAGE 03/03

H17000115872


**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

4/26/17  
\_\_\_\_\_  
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

4/26/17  
\_\_\_\_\_  
Date

17 APR 27 PM 4:26

SEE  
FILE  
2017

H17000115872