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**Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : CORP USA
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

FILED
MAY 5 2017
TALLAHASSEE, FLORIDA

17 MAY -5 AM 3:05

****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
MAYFUSION CORP.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

17 MAY -5 PM 4:16

DEPARTMENT OF REVENUE
BUREAU OF REVENUE
INFORMATION SERVICES

D O'KEEFE
MAY 08 2017

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: MAYFUSION CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5838 Collins Avenue Apt. 10-C

5838 Collins Avenue Apt. 10-C

Miami Beach FL 33140

Miami Beach FL 33140

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY LEGAL BUSINESS / ACTIVITTY PERMITTED IN THE
STATE OF FLORIDA.

ARTICLE IV SHARES

The number of shares of stock is: 100 (ONE HUNDRED)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARIA S. DODERO (President)

Name and Title:

Address 5838 Collins Avenue Apt. 10-C

Address:

Miami Beach FL 33140

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: MARIA S. DODERO
Address: 5838 Collins Avenue Apt. 10-C
Miami Beach FL. 33140

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MARIA S. DODERO
Address: 5838 Collins Avenue Apt. 10-C
Miami Beach FL. 33140

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 05/04/2017. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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
Date 05/04/2017

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
Date 05/04/2017

FILED
17 MAY -5 AM 8:11
TALLAHASSEE, FLORIDA