

P17000049819

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.

((H17000152905 3)))



H170001529053ABC/

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
DADE COUNTY AIR CONDITION SUPPLY, CORP.

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

N. SAMS
JUN 08 2017

RECEIVED FILED

17 JUN -7 PM 4:21 17 JUN -7 : 2:03

SECRETARY OF STATE
BUREAU OF COMMERCIAL INFORMATION SERVICES
TALLAHASSEE, FLORIDA

H17000152905

ARTICLES OF INCORPORATION
In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

Dade County Air Condition Supply, Corp.

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

53 W 21st Suite 1-2
Hialeah FL 33010

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

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Mario E Fundora (P) 50%
Damaris Perez Del Pino (VP) 50%

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Mario E Fundora
53 W 21st Suite 1-2
Hialeah FL 33010

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

Mario E Fundora
53 W 21st Suite 1-2
Hialeah FL 33010

H17000152905

06/07/2017 15:40 3052201440

LAZARUS

PAGE 03/03

H17000152905


06/06/2017 12:13 3052201440

RECEIVED 12/23/2012 00:18
LAZARUS

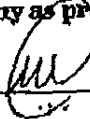
PAGE 02/03

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 06/06/17 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 06/06/17 Date

TALLAHASSEE, FLORIDA
SECRETARY OF STATE

17 JUN -7 11:20 AM

FILED

H17000152905