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Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
MORALES REPLIES, CORP**

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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:

MORALES REPLIES, CORP

ARTICLE II PRINCIPAL OFFICEPrincipal street address

10360 SW 216TH STREET

APT 207

MIAMI, FL 33190

Mailing address, if different is:

10360 SW 216TH STREET

APT 207

MIAMI, FL 33190

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: AIR CONDITION REPAIRS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CARLOS OSCAR MORALES

Name and Title:

Address

PRESIDENT

Address:

10360 SW 216TH STREET APT 207

MIAMI, FL 33190

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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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: CARLOS OSCAR MORALES
Address: 10360 SW 216TH STREET APT 207
MIAMI, FL 33190

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: CARLOS OSCAR MORALES
Address: 10360 SW 216TH STREET APT 207
MIAMI, FL 33190

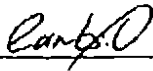
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01/10/2018 (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

01/10/2018

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.



Required Signature/Incorporator

01/10/2018

Date

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