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Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
LA GANGA GENERAL MECHANIC INC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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Help

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: LA GANGA GENERAL MECHANIC INC**ARTICLE II PRINCIPAL OFFICE**Principal street address2353 NW 17 AVEMIAMI FL 33142

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARESThe number of shares of stock is: 100 SHARES @ 1.00 PER VALUB SHA**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: ARMANDO RAMIREZ CESPEDES (PRIAddress 2353 NW 17 AVEMIAMI FL 33142

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

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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: ARMANDO RAMIREZ CESPEDES
Address: 2353 NW 17 AVE
MIAMI FL 33142

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ARMANDO RAMIREZ CESPEDES
Address: 2353 NW 17 AVE
MIAMI FL 33142

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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
04/16/2018
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
04/16/2018
Date

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