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.

(((H19000037314 3)))



H190000373143ABC

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 : 1200000000019 Phone

: (305)552-5973

: (305)675-5944 Fax Number

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 MACHINERY AND TRUCKS SALES AND SERVICE INC.

Certificate of Status	0
Certified Copy	11
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

3052201440

ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

MACHIVERY AND TRUCKS SALES AND SERVICE	£ 17
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	
7750 NW 52 ST DORAL PL	
33166. YAND #1	
ARTICLE III SHARES: The number of shares of stock is:	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	
GERARDO EMRIQUE SANDOVAL (P)	
	19
	JANO
	- -
	-
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:	
The name and Florida street address (PO Box not acceptable) of the registered agent is:	
Gerardo Enrique Sandoval	
1100 NW 52 ST Yard #1	
Doral FL 33166	
APTICLE III DICOPPORTO	
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is: GERARDO ENTIQUE SANDOVAL	
7750 NW 52 ST Word #1	
Doral FL 33160	

Date

Required Signatures:

Having been named as:	registered and to		
corporation at the place	e designated in this	eccept service of pro	ocess for the above stated niliar with and accept the
арроіntmen	t as registered agen	ceruncate, I am fan t and agree to act in	illiar with and accept the
		ugice to act III	this capacity
	$_{-}$ \mathcal{W}		
	Registered Agent		Duta

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 \$.817.155, F.S.

Date