

# P19000020817

**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.**

((H19000083898 3)))



H190000838983ABCD

**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  
MASTER DESIGN CONTRACTORS CORP**

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

19 MAR 12 AM 9:35  
ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED  
DATE 03-12-2019 BY 60322

Electronic Filing Menu

Corporate Filing Menu

Help

K PAGE

MAR 13 2019

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 (Profit)

**ARTICLE I NAME:** The name of the corporation is:Master Design Contractors corp**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

P; 9427 Fountainebleau Blvd #103  
Miami, FL 33172M; PO Box 654754, Miami, FL, 33265**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Michael Mario Zamora (VP)  
Barbara Jimenez (P)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

Barbara JIMENEZ  
9427 Fountainebleau Blvd #103  
MIAMI FL. 33172.**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Barbara JIMENEZ  
9427 Fountainebleau Blvd #103  
MIAMI, FL. 33172.

**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

Baldwin J 3/12/19  
Registered Agent 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.

Baldwin J 3/12/19  
Incorporator Date