

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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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
MANSON SERVICE AND TRANSPORTATION CORP.

Certificate of Status	0
Certified Copy	1
Page Count	03

RECEIVED

2019 APR -2 PM 5:00

\$ 78.75

Checkmark

ARTICLES OF INCORPORATION
In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

MANSO SERVICE AND Transportation
Corp.

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

8400 SW 133 Ave Rd Apto 423
Miami FLA 33183

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

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

(P) Ramiro C Manso Morales

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

8400 SW 133 Ave Rd Apto 423
Miami FLA 33183
Ramiro C Manso Morales

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

8400 SW 133 Ave Rd Apto 423
Miami FLA 33183
Ramiro C Manso Morales

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

Date

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

Date