#### Division of Corporations Electronic Filing Cover Sheet

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# FLORIDA PROFIT/NON PROFIT CORPORATION. MAGIC STYLES MOBILE DOG GROOMERS CORP

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

## ARTICLES OF INCORPORATION

The undersigned incorporate (s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE I - NAME

The name of the corporation shall be:

MAGIC STYLES MOBILE DOG GROOMERS CORP

3052201440

## ARTICLE II - PRINCIPAL OFFICE

The principal place of business and muiling address of this corporation shall be:

7225 W 11 CT APT 203 HIALEAH, FL 33014

#### ARTICLE III - SHARES

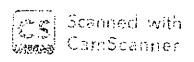
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ONE HUNDRED SHARES AT \$1.00 PER VALUE

## ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

LISSANNE MARTIN RODRIGUEZ 7225 W 11 CT APT 203 HIALEAH, FL 33014



#### ARTICLE V - INCORPORATOR

The name and street address of the incorporate to these Articles of Incorporation is:

LISSANNE MARTIN RODRIGUEZ 7225 W 11 CT APT 203 HIALEAH, FL 33014

The undersigned incorporator has executed these Articles of incorporation this  $\underline{2}$  day of  $\underline{\text{Decenber}}$ , 2019.

Signature LISSANNE MARTIN RODRIGUEZ

#### ARTICLE VI - DIRECTOR (S)

The name(s) and street address (s) of the director(s) to these Articles of Incorporation is (are):

**PRESIDENT** 

LISSANNE MARTIN RODRIGUEZ 7225 W 11 CT APT 203 HIALEAH, FL 33014

100%

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate. I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Signature

LISSANNE MARTIN RODRIGUEZ

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