## P200000011024

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
ertified Copies Certificates of Status					
Special Instructions to Filing Officer					

Office Use Only



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2020 JAN -8 PH 4: 00

M SIMMONS
JAN 08 2020

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

1. T. 19.76

Phone: 850-558-1500				
ACCOUNT NO. : 12000000195				
REFERENCE : 125711 8020289				
AUTHORIZATION Appells de mas				
COST LIMIT : \$70.00				
ORDER DATE : January 8, 2020				
ORDER TIME : 3:34 PM				
ORDER NO. : 125711-005				
CUSTOMER NO: 8020289				
DOMESTIC FILING				
NAME: MAKITOWERS CORP.				
EFFECTIVE DATE:				
XX ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING				
CONTACT PERSON: Kadesha Roberson - EXT.				

EXAMINER'S INITIALS:

## **COVER LETTER**

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

1 T ...

SUBJECT: MAK	CITOWERS CORP.		<u> </u>
	(PROPOSED CORPOR/	ATE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u> )
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	☐ \$87.50 Filing Fee. Certified Copy & Certificate o Status PY REOUIRED
FROM: Ma	irta Garcia Nam	e (Printed or typed)	
<u>175</u>	SSW 7th St. Suite 1712	Address	
Mia	ımi, FL 33130	C	
786	6-598-8009	State & Zip	
	Daytime 1	elephone number	
mai	ta.garcia@rclawllp.net E-mail address: (to be use	d for future annual report n	otification)

NOTE: Please provide the original and one copy of the articles.

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

ARTICLE I The name of th	NAME e corporation shall be:MAKITOWERS CORP.		
<u>ARTICLE II</u>	PRINCIPAL OFFICE Principal street address		Mailing address, if different is:
175 SW 7th St. S	Suite 1712		
Miami, FL 33	130		
ARTICLE III The purpose fo	PURPOSE r which the corporation is organized is: any and	all activities t	for which a corporation may
	business under Florida law		
			.,
	·		
		<u>-</u>	
ARTICLE IV	SHARES 2000		
The number of s	shares of stock is: 3000		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTORS		
Name	and Title: Antonio Montoro - President	Name and Titl	le: Xavier Ruiz - Secretary
Addre	175 SW 7th St. Suite 1712	Address:	175 SW 7th St. Suite 1712
	Miami, FL 33130	<del></del>	Miami, FL 33130
		_	
		_	
Name and Title:		Name and Titl	le:
Address		Address:	
			vanous de d'Philire de
Name and Title:		Name and Titl	le:
Address	ss	Address:	972) J
		_	
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			 G

Name ar	nd Title:	Name and Title:
Addres	s	Address:
	REGISTERED AGENT lorida street address (P.O. Box NOT acceptable	O of the repletered quantile
Name:	Corporation Service Company	) of the registered agent is:
Address:	1201 Hays St.	<u> </u>
	Tallahassee, FL 32301	<u> </u>
ARTICLE VII	<u>INCORPORATOR</u>	
The name and a	ddress of the Incorporator is:	
Name:	Marta Garcia	<u> </u>
Address:	175 SW 7th St. Suite 1712	<del></del>
	Miami, FL 33130	<u> </u>
<u>ARTICLE VIII</u>	EFFECTIVE DATE:	
Effective date, if (If an effective of	other than the date of filing:	
filing.)	and is not at the same mast be specific and the	mor be more than twe days prior of 70 days after the
	e inserted in this block does not meet the application of the free free free free free free inserts and free free free free free free free fre	ble statutory filing requirements, this date will not be listed as
the document 5 c	rifective date on the Department of State S recor	us.
Having been name	ned as registered agent to accept service of proce. familiar/with and occept the appointment as revi	ss for the above stated corporation at the place designated in this stered upont and agree to act in this capacity
	familiar with and accept the appointment as regi	Kadesha Roberson  Asst. Vice President
4	Required Signature/Registered Agent	Date
	cument and affirm that the facts stated herein of Department of State constitutes a third degree fe	are true. I am aware that the false information submitted in a lony as provided for in s.817.155, F.S.
Marxie	Motobo	1.8.2020
Required Signatu	Ird/Incorporator	Date

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