

P20 000032044

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

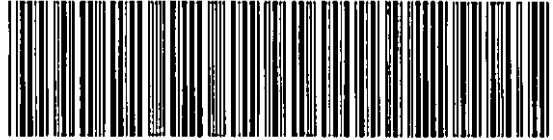
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/24/20--01016--017 **70.00

SECRETARY OF STATE
TALLAHASSEE, FL

2020 APR 24 PM 1:29

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COVER LETTER

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

SUBJECT: Majesty Crown Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Iracema Arauz
Name (Printed or typed)
8180 NW 36th St. # 406
Address
Doral, FL 33166
City, State & Zip
(305) 406-3800
Daytime Telephone number
A+plus @ Live. com
E-mail address: (to be used for future annual report notification)

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

DEPARTMENT OF STATE
TALLAHASSEE, FL

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AFFIDAVIT

BEFORE ME, the undersigned authority, on this day personally appeared, who after being firstly duly sworn, under oath, deposes and says:

1. The undersigned is also the sole Director and the President of **MAJESTY CROWN INC.** a Florida corporation to be filed with the Florida Department of State on or about **April 17, 2020**. **P16 000034996**
2. The undersigned hereby consents to and authorizes the use by **MAJESTY CROWN INC.** of the name **MAJESTY CROWN INC.**
3. The undersigned has personal knowledge of the fact and matter set forth herein and therefore has no intentions of reinstating the dissolved entity.

FURTHER AFFIANT SAYETH NAUGHT.


MARIA F PALAZZOLO

STATE OF FLORIDA)
) SS:
COUNTY OF MIAMI-DADE)

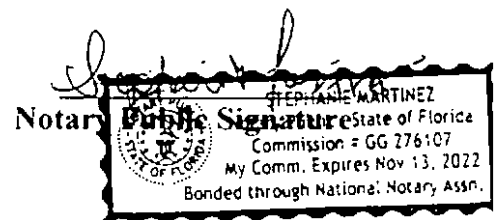
PERSONALLY appeared before me, Rigoberto Moreno, who is personally known to me, who being by my first duly sworn, acknowledges that he signed the foregoing for the purposes therein expressed.

Witness my hand and official seal this 17th day of April, 2020

SECRETARY OF STATE
TALLAHASSEE, FL

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Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Maria Flor Palazzolo
Address: 13105 Ixora Ct. #209
Miami, FL 33181

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Maria F. Palazzolo
Address: 13105 Ixora Ct. 209
North Miami, FL 33181

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TALLAHASSEE, FL

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 04/17/2020 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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:

Maria Palazzolo
Required Signature/Registered Agent

04/18/2020
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.

Maria Palazzolo
Required Signature/Incorporator

04/18/2020
Date

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: Majesty Crown Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

13105 Ixora Ct.
Apt 209

Mailing address, if different is:

North Miami, FL 33181

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any Lawful Purpose

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Maria Flor Palazzolo / President

Name and Title:

Address: 13105 Ixora Ct.

Address:

Apt 209

North Miami, FL 33181

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

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