

**P21000002681**

Florida Department of State  
Division of Corporations  
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**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**MRONLINE, INC**

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

2021 JAN 14 PM 4:26

**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: MRONLINE, INC**ARTICLE II PRINCIPAL OFFICE**Principal street address  
14709 SW 25th StMIAMI, FL 33185Mailing address, if different is:  
14709 SW 25th StMIAMI, FL 33185**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_

ANY AND ALL LAWFUL BUSINESS

21 JAN 14 12:31:58

**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: P: ANTUAN J. NOMNON N.Address 14709 SW 25th StMIAMI, FL 33185Name and Title: D: SAUL ALBERTO F. GUEVARA R.Address: 14709 SW 25th StMIAMI, FL 33185Name and Title: D: PIERRE E. ROLENS CANASAddress 14709 SW 25th StMIAMI, FL 33185

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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: ANTUAN J. NOMNON N.  
Address: 14709 SW 25th St  
MIAMI, FL 33185

**ARTICLE VII INCORPORATOR**

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

Name: ANTUAN J. NOMNON N.  
Address: 14709 SW 25th St  
MIAMI, FL 33185

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 01/14/2021 (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*

X \_\_\_\_\_ 01/14/2021  
Required Signature/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.*

X \_\_\_\_\_ 01/14/2021  
Required Signature/Incorporator Date