

P21000005026

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.  
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**\*\*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  
MOCKINGBIRD INC

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

J. FASON  
JAN 26 2021

2021 JAN 25 AM 6:36

2021 JAN 25 PM 4:52

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 (Profit)

**ARTICLE I NAME:** The name of the corporation is:

Mockingbird Inc

**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

150 Ocean Lane Drive Apt#8c Key Biscayne, FL 33140

**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

Carlos Livan Rodriguez (P)

**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

Carlos Livan Rodriguez

150 Ocean Land Drive Apt#8c Key Biscayne, FL 33140

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

Carlos Livan Rodriguez

150 Ocean Lane Drive Apt #8c Key Biscayne, FL 33140

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**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

*Carlos Rodriguez*\_\_\_\_\_  
Registered Agent*1/18/2021*\_\_\_\_\_  
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.

*Carlos Rodriguez*\_\_\_\_\_  
Incorporator*1/18/2021*\_\_\_\_\_  
Date

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