

From:
6/10/2021

06/22/2021 33 #646 P.001/003

PAI 000058912

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : S&S ACCOUNTING SERVICES, INC.
Account Number : I20190000091
Phone : (786)212-0491
Fax Number : (305)454-6657

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
MM WRAPPING STUDIOS, INC.

Certificate of Status	0
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Page Count	01
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: MM WRAPPING STUDIOS, INC.**ARTICLE II PRINCIPAL OFFICE**Principal street address1424 NE MIAMI PLACE UNIT 2012MIAMI, FL 33132

Mailing address, if different is:

ARTICLE III PURPOSEThe purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: JUAN DAVID MONTOYA LAVERDE, P Name and Title:Address 1424 NE MIAMI PLACE UNIT 2012 Address:MIAMI, FL 33132

Name and Title: Name and Title:

Address Address:

Name and Title: Name and Title:

Address Address:

From:

06/22/2021 12:34

#646 P.003/003

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: JUAN DAVID MONTOYA LAVERDE
Address: 1424 NE MIAMI PLACE UNIT 2012
MIAMI, FL 33132

ARTICLE VII INCORPORATOR

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

Name: S&S ACCOUNTING SERVICES, INC.
Address: 3383 NW 7 ST SUITE 304
MIAMI, FL 33125

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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

Required Signature/Registered Agent

06/10/2021

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.

Required Signature/Incorporator

06/10/2021

Date