

P21000059670

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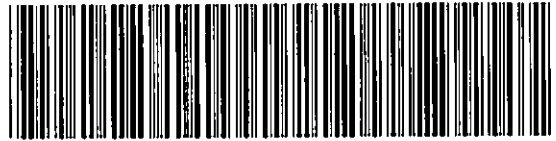
(Business Entity Name)

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**DATE:** 6/24/2021

**NAME:** MARTIN & GARCIA HOLDINGS CORP.

**TYPE OF FILING:** Articles

**COST:** 70.00

**RETURN:** PLAIN COPY PLEASE

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**ACCOUNT:** FCA000000015

**AUTHORIZATION:** ABBIE/PAUL HODGE

*A. Hodge*

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## COVER LETTER

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

**SUBJECT:** Martin & Garcia Holdings Corp  
(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:** Silvia Martin  
Name (Printed or typed)

15558 SW 152 Ln  
Address

Miami FL 33187  
City, State & Zip

(786)877-4888  
Daytime Telephone number

Silvi1129@yahoo.com  
E-mail address: (to be used for future annual report notification)

**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 NAME**

The name of the corporation shall be: Martin & Garcia Holdings Corp

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

15558 SW 152 Ln Miami FL 33187

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Any and all lawful business.

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**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Silvia Martin / Vice President Name and Title: Manuel Garcia / President

Address 15558 SW 152 Ln Address: 15558 SW 152 LN

Miami FL 33187 Miami FL 33187

Name and Title:  Name and Title:

Address  Address:

Name and Title:  Name and Title:

Address  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: Sylvia Martin  
Address: 15558 SW 152 Ln  
Miami, FL 33187

**ARTICLE VII INCORPORATOR**

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

Name: Sylvia Martin  
Address: 15558 SW 152 LN  
Miami FL 33187

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 06/23/2021 (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*

\_\_\_\_\_  
Required Signature/Registered Agent  
\_\_\_\_\_  
Date 06/23/20

*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  
\_\_\_\_\_  
Date 06/23/20

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TALLAHASSEE, FL

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