

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : FANJUL ENTERPRISES LLC
Account Number : I20190000080
Phone : (305)603-8791
Fax Number : (877)503-6086

****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
MCJ GENERAL SERVICES CORP**

Certificate of Status	0
Certified Copy	0
Page Count	01
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Corporate Filing Menu

T. SCOTT Help

DEC 09 2021

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: MCJ GENERAL SERVICES CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

2185 SW 14 TERMIAMI, FL 33145**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: _____

ANY AND ALL LAWFUL PURPOSES**ARTICLE IV SHARES**The number of shares of stock is: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: LUIS JUNIOR GONZALEZ VILORIA-PName and Title: CARINA CARRENO HERNANDEZ-VPAddress 2185 SW 14 TERAddress: 2185 SW 14 TERMIAMI, FL 33145MIAMI, FL 33145Name and Title: CATHERINE ANDREA GONZALEZ CARRENO-SEC

Name and Title: _____

Address 2185 SW 14 TER

Address: _____

MIAMI, FL 33145

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

DEC - 8 PM 12:04

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: _____ LUIS JUNIOR GONZALEZ VILORIA
Address: _____ 2185 SW 14 TER
_____ MIAMI, FL 33145

ARTICLE VII INCORPORATOR

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

Name: _____ LUIS JUNIOR GONZALEZ VILORIA
Address: _____ 2185 SW 14 TER
_____ MIAMI, FL 33145


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

 _____ 12/04/2021
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.

 _____ 12/04/2021
Required Signature/Incorporator Date