

P220000044047

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Division of Corporations
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RECEIVED
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CORPORATIONS
COMMERCIAL
SERVICES

FLORIDA PROFIT/NON PROFIT CORPORATION
MAGENTA KEY CORP

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

ALL INFORMATION FILED
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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: **MAGENTA KEY CORP**

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

11690 SW 25TH ST
DAVIE, FL-33325

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **SMALL BUSINESS**

ARTICLE IV SHARES

The number of shares of stock is: **1.00@100 par value**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **RAUL REMIGI - PRESIDENT**

Address: **11690 SW 25TH ST
DAVIE, FL-33325**

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

2022 JUN - 3 PM 2:05
CALLUM MOSSMAN, FL

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: RAUL REMIGI
 Address: 11690 SW 25TH ST
DAVIE, FL-33325

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: RAUL REMIGI
 Address: 11690 SW 25TH ST
DAVIE, FL-33325

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 06/02/2022 (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

Raul Remigi
 Required Signature/Registered Agent

6/2/22
 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.

Raul Remigi
 Required Signature/Incorporator

6/2/22
 Date

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 ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED