

P2200006172

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H22000262314 3)))



H220002623143ABOV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : 120000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

****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
P & M WOOD WORKS, CORP.**

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

2022 AUG -3 PM 3:18

FLORIDA
DEPARTMENT OF
STATE

2022 AUG -3 PM 1:30

Electronic Filing Menu

Corporate Filing Menu

Help

RS

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

EIN - 27-3274567

ARTICLE I NAME: The name of the corporation is:P & M WOODS WORKS, Corp.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

P - 9810 NW 80TH AVE BAY 8-H Hialeah GARDENS
FL 33016M - 8877 SW 25 ST Miami FL 33165**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**P - JIMENEZ PabloVP - VALDES ZENAIDATITLE EXECUTIVE DIRECTOR - JIMENEZ MAYENNI**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

Pablo JIMENEZ 8877 SW 25 ST Miami FL 33165**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Pablo JIMENEZ 8877 SW 25 ST Miami FL 33165

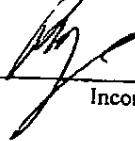
2022 AUG -3 AM 1:30

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

_____
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.

_____
Incorporator_____
Date

2022 AUG -3 AM 1:30