

P230000000658

Florida Department of State
Division of Corporations
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Division of Corporations

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FLORIDA PROFIT/NON PROFIT CORPORATION MR FIRE STOP, CORP

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

2023.1.13.4 P11 3:19

RS

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: MR FIRE STOP, CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address10090 NW 80TH CT APT 1251
HIALEAH GARDENS, FL 33016

Mailing address, if different is:

10090 NW 80TH CT APT 1251
HIALEAH GARDENS, FL 33016**ARTICLE III PURPOSE**The 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: MISAEAL MESA

Name and Title: _____

Address PRESIDENT

Address: _____

10090 NW 80TH CT APT 1251HIALEAH GARDENS, FL 33016

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: MISAEI MESA
Address: 10090 NW 80TH CT APT 1251
HIALEAH GARDENS, FL 33016

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MISAEI MESA
Address: 10090 NW 80TH CT APT 1251
HIALEAH GARDENS, FL 33016

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.

X _____
Required Signature/Registered Agent

01-04-2023
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.

X _____
Required Signature/Incorporator

01-04-2023
Date