

1/19/23, 3:56 PM

Division of Corporations

P23000004766

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : ALLSTATE CORPORATE SERVICES CORP
Account Number : I20040000031
Phone : (800)906-9220
Fax Number : (800)906-9880

****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 MASTER SLIDING DOOR REPAIR CORP

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

(((H23000024116 3)))

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

ARTICLE I NAMEThe name of the corporation shall be: MASTER SLIDING DOOR REPAIR CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

4910 SW 33RD TERRFORT LAUDERDALE, FL 33312**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY LAWFUL PURPOSE**ARTICLE IV SHARES**The number of shares of stock is: 200**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: ISRAEL AZRIEL, PRESIDENTName and Title: GAL PHILLIPS, VICE PRESIDENTAddress: 4910 SW 33RD TERRAddress: 16385 BISCAYNE BLVD, APT. 506FORT LAUDERDALE, FL 33312NORTH MIAMI BEACH, FL 33160

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 AGENTThe **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: ISRAEL AZRIEL

Address: 4910 SW 33RD TERR

FORT LAUDERDALE, FL 33312

ARTICLE VII INCORPORATORThe **name and address** of the Incorporator is:

Name: ISRAEL AZRIEL

Address: 4910 SW 33RD TERR

FORT LAUDERDALE, FL 33312

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*/S/ ISRAEL AZRIEL,

Required Signature/Registered Agent

1/18/2023

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./S/ ISRAEL AZRIEL,

Required Signature/Incorporator

1/18/2023

Date