

8 AM

Division of Corporations

P23000020646

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 : T20040000031
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: _____

2023 MAR 17 AM 12:25
DIVISION OF STATE
TALLAHASSEE, FL

FILED

FLORIDA PROFIT/NON PROFIT CORPORATION
MIDWOOD ACQUISITIONS ~~INC~~ Corp

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

2023 MAR 17 PM 3:43

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: MIDWOOD ACQUISITIONS CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3625 NORTH COUNTRY CLUB DR. #610

AVENTURA, FL 33180

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: SAM OKNIN, PRESIDENT Name and Title: _____

Address: 3625 NORTH COUNTRY CLUB DR. #610 Address: _____

AVENTURA, FL 33180 _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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SECRETARY OF STATE
TALLAHASSEE, 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: SAM OKNIN
 Address: 3625 NORTH COUNTRY CLUB DR. #610
AVENTURA, FL 33180

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: SAM OKNIN
 Address: 3625 NORTH COUNTRY CLUB DR. #610
AVENTURA, FL 33180

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 TALLAHASSEE, FL

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/ SAM OKNIN

 Required Signature/Registered Agent

03/07/2023

 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/ SAM OKNIN

 Required Signature/Incorporator

03/07/2023

 Date