

To:

6/12/23, 5:23 PM

Age: 07 06- 48:5 11 005 23
Division of Corporations
P23000046437

From: Alex Pina

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.

((H23000211682 3)))



H230002116823ABCZ

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 : ALEX PINA CO.
Account Number : I20190000095
Phone : (305)803-8471
Fax Number : (305)602-3977

2023 JUN 16 PM 2:48
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: client@alexpina.co

RECEIVED

2023 JUN 16 PM 4:50

SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

FLORIDA PROFIT/NON PROFIT CORPORATION
MIM INVESTMENT CORP

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

CH

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

ARTICLE I NAME

MIM Investment Corp

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

10700 NW 66th St Apt 403 Principal street address

Mailing address, if different is:

Doral, FL 33178

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **Any And All Lawful Purpose.**

ARTICLE IV SHARES

The number of shares of stock is: **10,000**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Pascual Simonelli - President**

Name and Title:

Address **10700 NW 66th St Apt 403**

Address:

Doral, FL 33178

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

FILED
2023 JUN 16 PM 2:48
SECRETARY OF STATE
TALLAHASSEE, FL

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: Alex Pina Co.

Address: 8400 NW 36th St Ste 450

Doral, FL 33166

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Pascual Simonelli

Address: 10700 NW 66th St Apt 403

Doral, FL 33178

FILED
 2023 JUN 16 PM 2:48
 SECRETARY OF STATE
 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.)

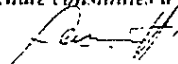
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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



Required Signature/Registered Agent_____
06/08/2023_____
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.



Required Signature/Incorporator_____
06/08/2023_____
Date