

6/26/23, 11:24 AM

Division of Corporations

P2300048338
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
((H23002261153)))

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((H23002261153)))



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

From: Account Name : YOUR DREAM SERVICES CORP.
Account Number : I2020000137
Phone : (786)560-0108
Fax Number : (786)364-1047

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

Email Address: info@yourdreamms.com

FLORIDA PROFIT/NON PROFIT CORPORATION

Madonilu Corp

RECEIVED
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CORPORATIONS
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Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

2023 JUN 26 AM 9:18

Electronic Filing Menu

Corporate Filing Menu

Help

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COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

(((H23000226115 3)))

SUBJECT: Madonilu Corp
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy
 \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: David Alberto Martinez Reinoso
Name (Printed or typed)

14915 Sw 80th St
Address

Miami, Florida 33193
City, State & Zip

305-725-7413
Daytime Telephone number

lvvinidamar@gmail.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

(((H23000226115 3)))

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

((1123000226115 3)))

ARTICLE I NAME

The name of the corporation shall be: Madonilu Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address: 14915 Sw 80th St, Miami, Florida 33193
Mailing address, if different is: 14915 Sw 80th St, Miami, Florida 33193

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: David Alberto Martinez Reinoso-President; Vivian Aracely Delgado Mora-Vice-President
Address: 14915 Sw 80th St, Miami, Florida 33193

Name and Title:
Address:

Name and Title:
Address:

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STATE OF FLORIDA

((H230002261153))

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: Your Dream Multiservices Corp
 Address: 8300 Nw 53rd St Suite 350
Miami, Florida 33166

ARTICLE VII INCORPORATOR

The **name and address** of the incorporator is:

Name: David Alberto Martinez Reinoso
 Address: 14915 Sw 80th St
Miami, Florida 33193

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 abovestated 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

Isamar Torres _____ 06/23/2023
 Required Signature/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.

David Alberto Martinez Reinoso _____ 06/23/2023
 Required Signature/Incorporator Date

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 STATE OF FLORIDA
 DEPARTMENT OF STATE