

P23000065723

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.

((H23000315958 3)))



H2300031 59583ABC3

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 : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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
M G G SERVICES CORP

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

DELIVERED

2023 SEP 11 PM 4:39

34011

2023 SEP 11 PM 3:16

100

[Electronic Filing Menu](#) [Corporate Filing Menu](#) [Help](#)

2ND REQUEST

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

MGG SERVICES CORP

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

141 W 7th Apt 44, HIALEAH, FL 33010

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Miguel Angel GÓMEZ GUZMÁN (P)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Miguel Angel GÓMEZ GUZMÁN

141 W, 7th Apt 44, HIALEAH, FL 33010

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

MIGUEL ANGEL GOMEZ GUZMAN
141 W 7th APT 44
HIALEAH FL 33010

2023 SEP 11 PM 3:11
FILED

EIN: 93 - 3304418

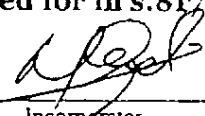
Required Signatures:

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



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.



Incorporator_____
Date

FILED
2023 SEP 11 PM 3:17
CORPORATE
RECORDS
DIVISION
STATE OF FLORIDA