9/21/23, 12:58 PM

Division of Corporations

# (H**.**30003B31183)))

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.

(((H23000333118 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : YOUR DREAM SERVICES CORP.

Account Number : I20200000137 Phone : (786)550-0108 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@vourdreamms.com

# FLORIDA PROFIT/NON PROFIT CORPORATION

## Mundo Cover Corp

Certificate of Status	l l
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

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From: Your dres

### **COVER LETTER**

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

(((H23000333118 3)))

SUBJECT: Mundo Cover 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

☑ \$78.75

Filing Fee Filing Fee & Certificate of Status

□ \$78.75

□ \$87.50

Filing Fee

Filing Fee.

& Certified Copy

Certified Copy & Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM:	Jose Jesus Delfino Salazar				
	Name (Printed or typed)  6941 NW 173rd DR  Address				
	Apto K101 City, State & Zip				
	786-971-8324				
	Daytime Telephone number				
	info@mundocovers.net				
	E-mail address: (to be used for future annual report notification)				

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

(((H23000333118 3)))

ARTICLES OF INCORPORATION (((H23000333118 3))) In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corpor	E ation shall be: Mundo Cover Corp.			
<u>ARTICLE II PRIN</u> 6941 NW 173rd DR	Principal street address	6941 NW	Mailing address, if differe 173rd DR	ntis:
Apta K101		Apto K101		
Miami, FL 33015		Miami, F	L 33015	
ARTICLE III PURI The purpose for which	the corporation is organized is: Entertaime		usical Productions and a	
				2733
ARTICLE IV SHAI The number of shares o	RES Estock is: 100 AL OFFICERS AND/OR DIRECTORS			2 MI 8: 02
Name and Tit	le: Jose Jesus Delfino Salazar -President	Name and Title	: Linda Milagro Trejo V	'Ice-President
Address	6941 NW 173rd DR	_ Address;	6941 NW 173rd DR	-
	Apto K101	_	Apto K101	
	Miami, FL 33015	-	Miami, FL 33015	
Name and Titl	e;	Name and Title	::	
Address		_ Address:		
	-	-		. =
Name and Title	ė. 	Name and Title		
Address	<u></u>	_ Address:		
		_		
		_		
	<del></del>		<del> </del>	

Name and	Title: (((H23000333118 3)))	Name and Title:
Address		Address:
	EGISTERED AGENT rida street address (P.O. Box NOT acceptable) o	of the registered agent is:
Name:	Your Dream multiservices Corp	_
Address:	9554 NW 41st ST	23
	Doral, Florida 33178	_ 
ARTICLE VII _ II	NCORPOR A TOR	2923 St. F 21
	ress of the Incorporator is:	73h
Name:	Jose Jesus Delfino Salazar	8. 0
Address:	6941 NW 173 DR Apto K101	02
	Miami, FL 33015	_
Effective date, if or	EFFECTIVE DATE: ther than the date of filing:	(OPTIONAL)
(If an effective da filing.)	te is listed, the date must be specific and canno	ot be more than five days prior or 90 days after the
	nserted in this block does not meet the applicable ective date on the Department of State's records.	e statutory filing requirements, this date will not be listed a
Having been name	das revistered avent to accept service of process (	for the above stated corporation at the place dexignated in t
	miliar with and accept the appointment as register	
	Asamar Torres Required Signature Registered Agent	09/20/2023
	Required Signature/Registered Agent	Date
	ment and affirm that the facts stated herein are partment of State constitutes a third degree felon	r true. I am aware that the false information submitted in ny as provided for in s.817.155, F.S.
Jose	Jesus Delfino Salazar	09/20/2023
Required Signature	Ancorporator	Date