

P23000081875

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H230004027103)))



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

From:
Account Name : RASI
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Fax Number : (917)243-5843

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 MAC84 CORP

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FL

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26

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: MAC84 CORP

ARTICLE II PRINCIPAL OFFICEPrincipal street address
3701 MIDTOWN DRIVE APT B210
TAMPA FL 33607Mailing address, if different is:
3701 MIDTOWN DRIVE APT B210
TAMPA FL 33607**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: to engage in any lawful act or activity for
which corporations may be organized.**ARTICLE IV SHARES**

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: GAVIN MCDONALD-President

Address: 3701 MIDTOWN DRIVE APT B210
TAMPA FL 33607

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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CLERK 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: GAVIN MCDONALD
 Address: 3701 MIDTOWN DRIVE APT B210
TAMPA FL 33607

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: GAVIN MCDONALD
 Address: 3701 MIDTOWN DRIVE APT B210
TAMPA FL 33607

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 business days prior or 90 business days after the filing.)

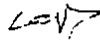
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

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

11/20/2023

 Date

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 2023 NOV 21 PM 3:20
 TALLAHASSEE FL
 DEPT. OF STATE