Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 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 MENDEZ SUPERIOR NATIONAL CORP

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

2024 JUL 13

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

| MARIONAL CORP |
|---|
| ARTICLE II PRINCIPAL OFFICE: |
| The principal street address and mailing address is: |
| 1250 SIN 27Th AVE SUITE 306 migm, FL 33135 |
| |
| |
| ARTICLE III SHARES: The number of shares of stock is: |
| ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS: |
| |
| Miguel antonio Viers mendez |
| $\frac{J}{Q}$ |
| |
| |
| |
| ARTICLE V INTHAL REGISTERED ACENT AND COMP |
| AND STREET ADDRESS. |
| The name and Florida street address (PO Box not acceptable) of the registered agent is: |
| 1250 SWZITH AVF SUITE 306 miami |
| FI 33135 |
| |
| ARTICLE VI INCORPORATOR: The name and address of the Incorporator is: |
| DIEC antonio Viena mender |
| 1250 SWZITH AVE SUITE 306 miami |
| <u>F1 33135</u> |

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