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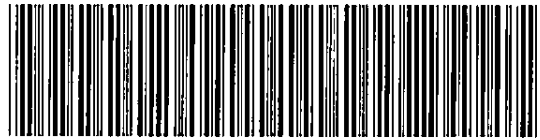
(Business Entity Name)

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**DATE:** 12/10/2024

**NAME:** MACIAS GROUP INTERNATIONAL INC.

**TYPE OF FILING:** ARTICLES

**COST:** 70.00

**RETURN:** PLAIN COPY PLEASE

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**ACCOUNT:** FCA000000015

**AUTHORIZATION:** ABBIE/PAUL HODGE

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## COVER LETTER

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

SUBJECT: Macias Group International Inc.

(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: TOMAS A. GONZALEZ, JR., ESQ.

Name (Printed or typed)

PO BOX 934878

Address

MARGATE, FLORIDA 33093-4878

City, State & Zip

(954) 642-2083

Daytime Telephone number

sunbiz@tomasgonzalezlaw.com

E-mail address: (to be used for future annual report notification)

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

**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: Macias Group International Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

11251 NW 20TH ST STE 101

MIAMI FL 33172

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY LAWFUL PURPOSE

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Valeria Macias-Flores P

Name and Title: \_\_\_\_\_

Address 11251 NW 20TH ST STE 101

Address: \_\_\_\_\_

MIAMI FL 33172

Name and Title: Mar Adan Enriquez V

Name and Title: \_\_\_\_\_

Address 11251 NW 20TH ST STE 101

Address: \_\_\_\_\_

MIAMI FL 33172

Name and Title: Aida Lourdes Macias S

Name and Title: \_\_\_\_\_

Address 11251 NW 20TH ST STE 101

Address: \_\_\_\_\_

MIAMI FL 33172

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: Valeria Macias-Flores

Address: 11251 NW 20TH ST STE 101

MIAMI FL 33172

**ARTICLE VII INCORPORATOR**

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

Name: TOMAS A. GONZALEZ, JR., ESQ.

Address: PO BOX 934878

MARGATE, FLORIDA 33093-4878

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 01/01/2025 (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 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*

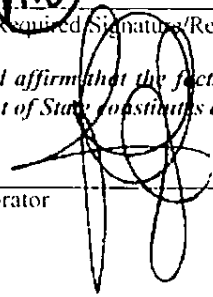


\_\_\_\_\_  
Required Signature/Registered Agent

12/09/2024

\_\_\_\_\_  
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.*



\_\_\_\_\_  
Required Signature/Incorporator

12/09/2024

\_\_\_\_\_  
Date