

Florida Department of State

Division of Corporations

Electronic Filing System

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

From:
Account Name : MJD ACCOUNTING SERVICES CORP
Account Number : 120220000156
Phone : (954)471-5645
Fax Number : (305)356-3688

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
STOPCOOLING INC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

STATE
JAN-6 PM 4:03
2025

RECEIVED
2025 JAN -6 AM 10:37
STOPCOOLING INC
1117 1117 1117

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAMEThe name of the corporation shall be: **STOPCOOLING INC****ARTICLE II PRINCIPAL OFFICE**Principal street address11121 N SNAPPER CREEK DR
MIAMI FL 33173

Mailing address, if different is:

ARTICLE III PURPOSEThe purpose for which the corporation is organized is: **ANY AND ALL LAWFUL BUSINESS****ARTICLE IV SHARES**The number of shares of stock is: **100****ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: **EFRAIN URIBE LOPERA**Address: **11121 N SNAPPER CREEK DR
MIAMI FL 33173**Name and Title: **PRESIDENT**

Address:

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

STATE
FILE

JAN-5 PM 4:03

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Name and Title:	_____	Name and Title:	_____
Address:	_____	Address:	_____
	_____		_____
	_____		_____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: EFRAIN URIBE LOPERA
Address: 11121 N SNAPPER CREEK DR
MIAMI FL 33173

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: EFRAIN URIBE LOPERA
Address: 11121 N SNAPPER CREEK DR
MIAMI FL 33173

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 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

<u>X EFRAIN URIBE L</u>	<u>1/3/2025</u>
Required Signature/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.

<u>X EFRAIN URIBE L</u>	<u>1/3/2025</u>
Required Signature/Incorporator	Date

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