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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
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\*\*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
WAC INDUSTRIES CORP.

Table with 2 columns: Item and Value. Rows include Certificate of Status (0), Certified Copy (1), Page Count (03), and Estimated Charge (\$78.75).

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
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**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: WAC INDUSTRIES CORP.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

8103NW 68TH Street, Miami FL 33166

\_\_\_\_\_

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: INTERNATIONAL TRADE IN GENERAL  
IMPORT AND EXPORT - COMMERCIAL REPRESENTATIONS FOR AUTOMOTIVE PARTS  
AND OTHER ACTIVITIES RELATED TO INDUSTRIAL AND AUTOMOTIVE REFRIGERATION

**ARTICLE IV SHARES**

The number of shares of stock is: 100

21 FEB 25 11 08 15  
MVA

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

Name and Title: BYRON E KEELER - P,  
Address: 8103NW 68 Street  
Miami FL 33166

Name and Title: CARLOS E VALERO VP  
Address: 8103NW 68St  
Miami Fl 33166

Name and Title: ANGELICA L. DURAN, D  
Address: 42290NW 107TH AVE, APT 4501  
DORAL FL 33178

Name and Title: FRANCISCO J. HERNANDEZ - D,  
Address: 422ONW 107th Av Apt 4501  
Doral Fl 33178

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

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

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: BYRON E KEELER  
 Address: 8103NW 68 Street, Miami FL 33166  
 \_\_\_\_\_

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: BYRON E KEELER  
 Address: 8103NW 68 Street, Miami FL 33166  
 \_\_\_\_\_

**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*

\_\_\_\_\_  
 Required Signature/Registered Agent 02/25/2021  
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 02/25/2021  
Date