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uegrillc@gmail.com

FLORIDA PROFIT/NON PROFIT CORPORATION MASON CAPITAL 1 CO.

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January 31, 2025

FLORIDA DEPARTMENT OF STATE Division of Corporations

HUBCO

SUBJECT: MASON CAPITAL 1 LTD

REF: W25000012147

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The use of LIMITED or LTD. is not acceptable as a corporate suffix. The name must include a word such as INCORPORATED, INC., CORPORATION, CORP., COMPANY, or CO.

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Matthew H Hitchcock Regulatory Specialist II New Filing Section

FAX Aud. #: H25000036052 Letter Number: 025A00002025

H25000036052

ARTICLES OF INCORPORATION

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

| he name of the corpo | E ration shall be: N | MASON CAPITAL 1 CO. | | | | |
|--|---|---------------------|-----------------------------------|-------------|------------------|------|
| RTICLE II PRIE 1651 SW 26TH C AVIE, FL 33330 | SCIPAL OFFICE Principal street address | | Mailing address, if different is: | | | |
| TREAL PUR. The purpose for which | n the corporation is organized is: Any t | ····· | | | | |
| | | | | | | |
| RTICLE V INIT | RES of stock is: 100 at No Par Value | <u> </u> | | | 202 5 JAN | |
| Address 11651 | tle: JUAN MONEGRO - President/Dir 11651 SW 26TH CT | Nan | | | 3 P | |
| | DAVIE, FL 33330 | - | | , A | 1 5: 28 | F 14 |
| Name and Tit | le: | Nan | ne and Title: | | ····· | |
| Address | | Adc | | | | |
| Name and Tit | le: | | | | | |
| Address | | Add | lress: | | | |
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| 2025 17:26 | rax x | 15 | o168131184 |
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| Name an | nd Title: | Name and Title: | |
| Address | · | Address: | |
| | *************************************** | | |
| | , , , , , , , , , , , , , , , , , , , | | |
| , B. (T. C. C. L.) | | | |
| | REGISTERED AGENT lorida street address (P.O. Box NOT acce | ptable) of the registered agent is: | |
| Name: | JUAN MONEGRO | · · · · · · · · · · · · · · · · · · · | |
| Address: | 11651 SW 26TH CT | | |
| | DAVIE, FL 33330 | | |
| 4 10 10 10 10 10 10 10 10 10 10 10 10 10 | WGODDODUTOO | | |
| | <u>INCORPORATOR</u> | | |
| The <u>name and ac</u> | ddress of the Incorporator is: | | |
| Name: | JUAN MONEGRO | | |
| Address: | 11651 SW 26TH CT | | |
| | DAVIE, FL 33330 | | |
| ADTICLE VIII | EFFECTIVE DATE. | | |
| Effective date, if | EFFECTIVE DATE: other than the date of filing: date is listed, the date must be specific a | (OPTIONA) | L) ariar or 90 days after the |
| filing.) | rate is fisted. the date must be specific a | nd cannot be more than tive days | betor or so days after the |
| | inserted in this block does not meet the a | | nts, this date will not be listed as |
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| | ned as registered agent to accept service of | | |
| certificate, I am f | familiar with and accept the appointment a | is registered agent and agree to act in | n this capacity |
| | Manin | | January 29, 2025 |
| Required Signatu | re/Registered Agent JUAN MONEGR | 10 | Date |
| | cument and offirm that the facts stated he Department of State constitutes a third deg | | |
| | / ha/m | ~ | January 29 2025 |
| Required Signatu | ure/Incorporator JUAN MONEGRO | | Date |
| | 7 | | π ω ; |
| | | | - IT |