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1000 Ponce de Leon Blvd. Suite: 105 Coral Gables, FL 33134 Phone: 305-444-4994 Email: filing@ecfsfiling.com

Office Use	Only	

CORPORATION NAME(S)) & DOCUMENT NUMBERS(S):
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(CORPORATE NAME)	I	(DOCUMENT	#)) <u>.</u>	16	
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	New Filings
X	Profit
	Non-Profit
	Limited Liability
	Other:

Amendments 1
Amendments
Resignation
Dissolution/Withdrawal
 Other:

Other Filings
Annual Report
Fictitious Name
Apostille:
Other:

Examiners	Initials	

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

FILED

ARTICLE I NAME The name of the corpora	E DMW GROUP CO ation shall be:					P8 4: (
RTICLE II PRIN	CIPAL OFFICE Principal street address	Mailing address, if dit	ferent	is:	•	
100 S. DADELAND	BLVD STE: 1500					
ЛІАМІ, FL 33156						_
RTICLE III PURP	OSE the corporation is organized is:	LAWFUL BUSINESS				
						
RTICLE V INITL	f stock is: AL OFFICERS AND/OR DIRECTORS WILLIAM GERARDO MOSQUERA (P)					
	le: WILLIAM GERARDO MOSQUERA (P) 9100 S. DADELAND BLVD STE:1500					
Address	MIAMI, FL 33156	Address:				_
						_
Name and Title	DULCE SCAPINELLO (V/P)	Name and Title:				_
Address	9100 S. DADELAND BLVD STE: 1500	Address:				
	MIAMI, FL 33156					_
Name and Title	<u> </u>	Name and Title				<u>-</u>
Address						

Name ar	nd Title:	Name and Title:
Addres	s	Address:
	REGISTERED AGENT	-Cake manifestand access in
Name:	Florida street address (P.O. Box NOT acceptable) of WILLIAM GERARDO MOSQUERA	of the registered agent is:
Address:	9100 S. DADELAND BLVD STE: 1500	
	MIAMI, FL 33156	
ARTICLE VII	<u>INCORPORATOR</u>	
The name and a	ddress of the Incorporator is:	
Name:	WILLIAM GERARDO MOSQUERA	
Address:	9100 S. DADELAND BLVD STE:1500	_
	MIAMI, FL 33156	
ARTICLE VIII Effective date, if (If an effective days after the fi	EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific and cann iling.)	(OPTIONAL) ot be more than five business days prior or 90 busine
	e inserted in this block does not meet the applicable effective date on the Department of State's records.	e statutory filing requirements, this date will not be listed
	med as registered agent to accept service of proces am familiar with and accept the appointment as re	ss for the above stated corporation at the place designat egistered agent and agree to act in this capacity
		08/18/2016
	Required Signature/Registered Agent	Date
	cument and affirm that the facts stated herein are Department of State constitutes a third degree felo	e true. I am aware that the false information submitted ny as provided for in s.817.155, F.S.
		08/18/2016
Requ	ired Signature/Incorporator	Date