

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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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  
DE LA VEGA SOLUTIONS INC**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

MAY 10 2016

T. SCOTT

RECEIVED

16 MAY -9 PM 4:52

CLERK OF STATE  
TALLAHASSEE, FLORIDA

16 MAY -9 AM 9:29

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

H16000115078

Florida Department of State

Attention: New Filings Section

To whom it may concern:

This is to advise you that the owners of De La Vega Solutions Inc of Doc # PO8000021314 are the same owners of the attached articles of incorporation. We have dissolved the company and have no intention of reopening it. Thank you for your help in this matter.

Very Sincerely,



H16000115078

**ARTICLES OF INCORPORATION H16000115078**

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

Add Tax ID: 46-2065764

**ARTICLE I NAME:** The name of the corporation is:De la Vega Solutions INC**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

2820 NW 97th St Miami FL33147**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Ibrahim F. De La Vega (P)

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**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Ibrahim F. De La Vega2820 NW 97th StMiami FL 33147**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Ibrahim F. De La Vega2820 NW 97th StMiami FL 33147FILED  
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**Required Signatures:**

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

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.

Incorporator

Date \_\_\_\_\_

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