

5/17/2016

Division of Corporations

N/1600004903

Florida Department of State
Division of Corporations
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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION
DISCOVERY INVESTIGATION CENTER MIAMI, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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DIVISION OF CORPORATIONS

05/18/16

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME DISCOVERY INVESTIGATION CENTER MIAMI, INC.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address:
202 NE 65 STREET
MIAMI, FL 33138

Mailing address, if different is:
SAME

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CORPORATION
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ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
This organization will provide donations and benefits to community.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Minutes & By-Laws

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	Elio A. Vendittelli (P/D)	Name and Title:	
Address	202 NE 65 STREET MIAMI, FL 33138	Address:	
Name and Title:	Jainc A. Vitacura (V/D)	Name and Title:	
Address	202 NE 65 STREET MIAMI, FL 33138	Address:	
Name and Title:		Name and Title:	
Address		Address:	

Name and Title: _____ Name and Title: _____
 Address: _____ 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: JOEL ROZAS
 Address: 202 NE 65 STREET
MIAMI, FL 33138

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Elio A. Vendittelli
 Address: 202 NE 65 STREET
MIAMI, FL 33138

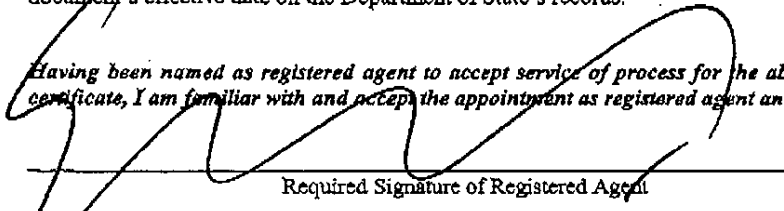
ARTICLE VIII EFFECTIVE DATE:

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 business days prior or 90 business 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.

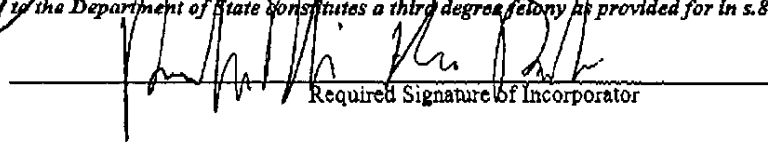
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



_____ Required Signature of Registered Agent

_____ Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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 of Incorporator

_____ Date

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