

P03000114093

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

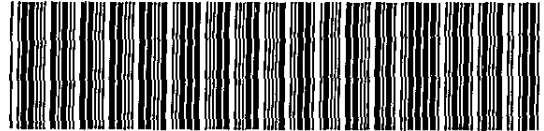
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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10/15/03--01058--006

\*\*78.75

FILED  
03 OCT 15 PM 12:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
03 OCT 15 AM 11:50  
DIVISION OF CORPORATION

on 10/15

OFFICE USE ONLY(DOCUMENT #)

**LAZARUS CORPORATE FILING SERVICE**

**3320 S.W. 87 AVENUE**

**MIAMI, FLORIDA (305)552-5973**

OFFICE USE ONLY

**CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):**

1. DCG SERVICES, INC;  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☒ Walk in ☒ Pick up time 2:00 ☒ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

| NEW FILINGS                         |                   |
|-------------------------------------|-------------------|
| <input checked="" type="checkbox"/> | Profit            |
| <input type="checkbox"/>            | NonProfit         |
| <input type="checkbox"/>            | Limited Liability |
| <input type="checkbox"/>            | Domestication     |
| <input type="checkbox"/>            | Other             |

| AMENDMENTS               |                                       |
|--------------------------|---------------------------------------|
| <input type="checkbox"/> | Amendment                             |
| <input type="checkbox"/> | Resignation of R.A., Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent            |
| <input type="checkbox"/> | Dissolution/Withdrawal                |
| <input type="checkbox"/> | Merger                                |

| OTHER FILINGS            |                  |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report    |
| <input type="checkbox"/> | Fictitious Name  |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/<br>QUALIFICATION |                     |
|--------------------------------|---------------------|
| <input type="checkbox"/>       | Foreign             |
| <input type="checkbox"/>       | Limited Partnership |
| <input type="checkbox"/>       | Reinstatement       |
| <input type="checkbox"/>       | Trademark           |
| <input type="checkbox"/>       | Other               |

Examiner's Initials

## 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:

DCG Services, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

321 lake View Drive # 203  
Weston, FL 33326

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY PURPOSE OR ACTIVITY PERMITTED UNDER THE LAWS OF THE UNITED STATES OF AMERICA  
AND OF THE STATE OF FLORIDA.

### ARTICLE IV SHARES

The number of shares of stock is:

100

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Nestor Guzman (President)  
Fabiola Peña (Vice-President)  
321 Lakeview Dr #203  
Weston, FL 33326

### ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Nestor Guzman  
321 lake View Drive # 203  
Weston, FL 33326

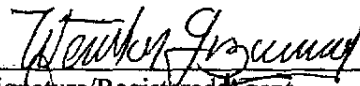
### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

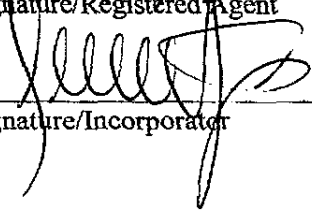
Nestor Guzman  
Fabiola Peña  
321 Lakeview Dr #203  
Weston, FL 33326

\*\*\*\*\*

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

  
\_\_\_\_\_  
Signature/Registered Agent

10-14-03  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

10-14-03  
\_\_\_\_\_  
Date

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