

P07000020788

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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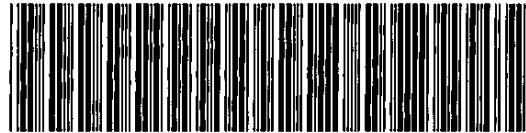
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2-15-07
69C

COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: DOMA ENTERTAINMENT, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: ORLANDO LEYBA

Name (Printed or typed)

1946 SW 22ND TR

Address

MIAMI, FLORIDA 33145

City, State & Zip

786.380.3497

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

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:
DOMA ENTERTAINMENT, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:
1946 SW 22TR MIAMI, FL 33145

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
TO ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND THE STATE OF FLORIDA

ARTICLE IV SHARES

The number of shares of stock is:
6,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ORLANDO LEYBA	1946 SW 22 TR MIAMI, FL 33145	DIRECTOR
VANESSA LOZANO	1946 SW 22 TR MIAMI, FL 33145	OFFICER

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

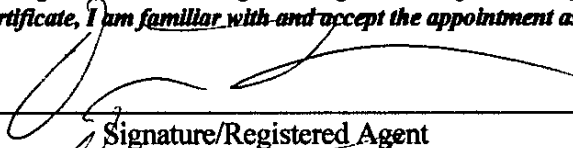
ORLANDO LEYBA 1946 SW 22 TR MIAMI, FL 33145

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ORLANDO LEYBA 1946 SW 22 TR MIAMI, FL 33145

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



Date



Signature/Incorporator



Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA