

PD9000040623

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

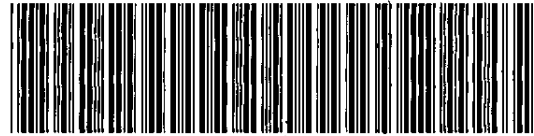
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/06/09--01028--001 **70.00

09 MAY -5 AM 11:28
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

W09000021659

COVER LETTER

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

SUBJECT: DELTA CAPITAL, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: DARRION J. WILLIAMS
Name (Printed or typed)
1715 NW 185 TER.
Address
MIAMI GARDENS, FL 33056
City, State & Zip
786-355-2252
Daytime Telephone number
DJW001@MSN.COM
E-mail address: (to be used for future annual report notification)

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

May 4, 2009

To whom it may concern:

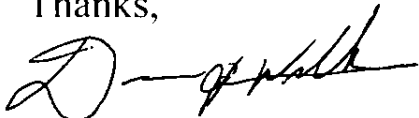
I Darrion Williams have no intention of revocation of the dissolution for the said corporation:

Delta Capital Inc
Document #: P06000111710

And I am given up all rights to corporation name:

Delta Capital, Inc.

Thanks,



Darrion J Williams

09 MAY -6 AM 11:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

DELTA CAPITAL, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

1715 NW 185 TER.
MIAMI GARDENS, FL 33056

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DARRION J. WILLIAMS - DIR, PRES, SEC.
1715 NW 185 TER
MIAMI GARDENS, FL 33056

ARTICLE VI REGISTERED AGENT

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

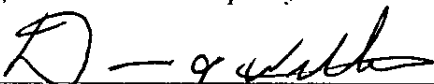
DARRION J. WILLIAMS
1715 NW 185 TER.
MIAMI GARDENS, FL 33056

ARTICLE VII INCORPORATOR

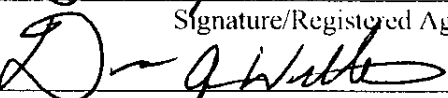
The name and address of the Incorporator is:

DARRION J. WILLIAMS
1715 NW 185 TER
MIAMI GARDENS, FL 33056

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



Signature/Incorporator

05/04/09

Date

05/04/09

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 MAY -6 AM 11:28

FILED