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2010 AUG 25 PM 3:44

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2010 AUG 26 2:00 PM

COVER LETTER

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

SUBJECT: Dee's Immigration Services 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

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Denecia Ann Fisher

Name (Printed or typed)

10954 SW 158 Terrace

Address

Miami, Florida 33157

City, State & Zip

786 394 7387

Daytime Telephone number

Deesimmigrationservices@gmail.com

E-mail address: (to be used for future annual report notification)

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:

Dee's Immigration Services Inc.

ARTICLE II PRINCIPAL OFFICE

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

10954 SW 158 Terrace

Miami, Florida 33157

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

A Professional Corporation

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):

Denecia Fisher
10954 SW 158 Terr,
Miami FL 33157/
President

ARTICLE VI REGISTERED AGENT

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

Denecia Fisher
10954 SW 158 Terr
Miami, FL 33157

ARTICLE VII INCORPORATOR

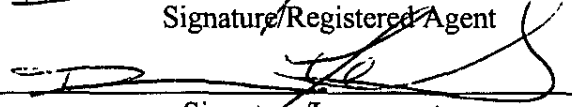
The name and address of the Incorporator is:

Denecia A. Fisher
10954 SW 158 Terrace
Miami, Florida 33157

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



Date



Date

RECEIVED
STATE OF FLORIDA
TALLAHASSEE

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