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(Requestor's Name)	
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" PICK-UP WAIT	MAIL
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SECRETARY OF STATE

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## **COVER LETTER**

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

SUBJECT: C	Data Deal Solutions		
	(PROPOSED CORPORATE NAME	- MUST INCLUDE SUFFIX)	
/			
Enclosed are a	n original and one (1) copy of the articles of inc	corporation and a check for:	
\$70.00 Filing I	Fee) ♥ Filing Fee \	Filing Fee, rtified Copy Certified Copy & Certificate of	
•	ADD	Status ITIONAL COPY REQUIRED	
FROM	ı: Imene Seide-Balthazar		
	Name (Printed o	or typed)	
	1680 NW-128 Street	SECRETAR TALLAHASS	
•	Address	AH AH	The profit
• .	North Miami Florida 33167		
	City, State & Z	<u>-</u> 470 = 5	
	305 370 9099	CS COR	,
	Daytime Telephone	number grand	5
	jibstraining@gmail.com ✓	annual roport notitioation)	

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)

NAME

ARTICLE I The name of the	corporation shall be: Data Deals Solution	ion. Corp.	
ARTICLE II	PRINCIPAL OFFICE Principal street address 1680 NW 128 Street North Miami Florida 33167	·	Mailing address, if different is:
		oselt age mach ce mach unds, com	technology Products edia, Computer Access himes, Mice & Keyboovds, # Miputers
ARTICLE IV The number of sh	SHARES nares of stock is:		
Name and Address:	INITIAL OFFICERS AND/OR DIRE TITLE: IMPNE BOLLINOS ILGO NW D. 8 ST NOVAM MI OM)  FI 33110		and Title:
	Title: EVINETE VENON TITLE: EVINETE VENON	Name a Address	and Title:
Name and Address:	Title:	Name a Address	and Title:
ARTICLE VI The name and F Name: Address:	REGISTERED AGENT  lorida street address (P.O. Box NOT accept  TOO WILLIAM TO STAND T	table) of the registe	ARY SSE
ARTICLE VII The name and ac Name: Address:	INCORPORATOR  ddress of the Incorporator is:  LOPO JEGS 501  LOPO NU 12 8  MICHIEL 1331	nja	PH 3: 50 E.FLORIO
	am familian with and accept the appointmen	nt as registered age	3-17-1)
I submit this doc document to the	Required Signature/Registered Age cument and affirm that the faces stated her Department of State constitutes a third degre	rein are true. I an	Date  am aware that the false information submitted in a ided for in s.817.155, F.S.
<u></u>	Required Signature/Incorporato		Date