

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

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

SUBJECT: DMC Advantage, Inc	
(PROPOSED CORPORA	FE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:
Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED
FROM: Anna Cecilia Figueroa Name	(Printed or typed)
14453 NW 83 Path	
A	ddress
Miami, FL 33016 City,	State & Zip
305-978-1442 Daytime Te	elephone number
picos33@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 DMC Advantage, In	ıc	
*-	corporation shall be:		
ARTICLE II	PRINCIPAL OFFICE	Mailing ad	ldress, if different is:
n.	Principal street address 14453 NW 83 Path		h Street # 607
	Miami, FL 33016		6
	Mani, FL 33016	Wilding CL 330 H	
ARTICLE III	PURPOSE	•	
	which the corporation is organized is:		
•			
ARTICLE IV The number of si	<u>SHARES</u> hares of stock is: 100 shares		
	INITIAL OFFICERS AND/OR DIREC		
	Title: Anna Cecilia Figueroa		<u></u>
Address:	14453 NW 83 Path		
	Miami, FL 33016		
			
	Title:	Name and Title:	
Address:		Address:	
			
	Title:	Name and Title:	
		Address:	
			
			12 866
	REGISTERED AGENT		
	Iorida street address (P.O. Box NOT accepta		
Name:	Anna Cecilia Figueroa		
Address:	14453 NW 83 Path		10 (2)
	Miami, EL 33016		
ARTICLE VII	INCORPORATOR		တ္ 💨
	ddress of the Incorporator is:		
Name:	Anna Cecilia Figueroa		0
Address:	14453 NW 83 Path		•
	Miami, FL 33016		
Havina haan na	med as registered agent to accept service of p	process for the above stated corne	ration at the place designated in
	mea as registered agent to accept service of p am familiar with and accept the appointment		
•	Δ · · · · ·		• •
	Required S gnature/Registered Ager		2/14/2012
	Required Signature/Registered Ager	nt	Date
	cument and affirm that the facts stated here. Department of State constitutes a third degree		
	ur_		2/14/2012
	Required Signature/Incorporator		Date