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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : BARINAS & ASSOCIATES INC.
Account Number : I20000000082
Phone : (305) 871-0889
Fax Number : (305) 870-9623

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
DYLAN COMPUTER SALE & REPAIR INC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

RECEIVED
13 APR -8 AM 8:26
DIVISION OF CORPORATIONS

FILED
13 APR -8 AM 9:40
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

April 05, 2013
Miami, Florida

To whom it may concern:

I, DENNYS HERNANDEZ, President of DYLAN COMPUTER SALE & REPAIR INC., with Document number P11000065056, hereby relinquish the company name to be used to incorporate a new company with the same name. The new company will be associated with the previous company by its owners.

Please send the incorporation documents to:

Barinas & Associates, Inc.
5701 NW 36 ST
Miami, FL 33166
Fax: 305-870-9623

Kind Regards,


DENNYS HERNANDEZ

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME DYLAN COMPUTER SALE & REPAIR INC
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
3124 SW 142 PL
MIAMI, FL 33175

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 1000 SHARES AT NOT PART VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	PRESIDENT	Name and Title:	_____
Address:	DENNYS HERNANDEZ	Address:	_____
	3124 SW 142 PL		_____
	MIAMI, FL 33175		_____

Name and Title:	VICE PRESIDENT	Name and Title:	_____
Address:	ROSIBERT TRUJILLO	Address:	_____
	3124 SW 142 PL		_____
	MIAMI, FL 33175		_____

Name and Title:	_____	Name and Title:	_____
Address:	_____	Address:	_____
	_____		_____
	_____		_____

ARTICLE VI REGISTERED AGENT

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

Name: DENNYS HERNANDEZ
Address: 3124 SW 142 PL
MIAMI, FL 33175

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DENNYS HERNANDEZ
Address: 3124 SW 142 PL
MIAMI, FL 33175

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

Dennys Hernandez
Required Signature/Registered Agent

4/5/13
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Dennys Hernandez
Required Signature/Incorporator

4/5/13
Date

18 APR - 8 AM 9:40
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

FILED