## P13000044541

(Requ	uestor's Name)	
(Addi	ess)	
(Address)		
(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Busi	ness Entity Nar	ne)
(Doct	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



100247855441

05/20/13--01026--014 \*\*78.75

13 MAY 20 PM to 06 SEQUENCE OF NAME OF

T. Suret MAY 2 1 2013



## **COVER LETTER**

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

SUBJECT:	DANVIER INVESTMENTS 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 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
		1,5511161112	

6001 NW 153 Street, Suite 160  Address  Miami Lakes, FL 33014  City, State & Zip  305-823-8110  Daytime Telephone number	M:	Name (Printed or typed)
Miami Lakes, FL 33014  City, State & Zip  305-823-8110  Daytime Telephone number	60	•••
City, State & Zip  305-823-8110  Daytime Telephone number		Address
305-823-8110  Daytime Telephone number	Mi	ami Lakes, FL 33014
Daytime Telephone number		City, State & Zip
•	30	5-823-8110
Danvierinvest@gmail.com		Daytime Telephone number
Darricanive Stagnan.com	Da	nvierinvest@gmail.com

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)

The name of the corpora		nts Inc	
ARTICLE II PRI	<b>NCIPAL OFFICE</b> Principal <b>street</b> address		Mailing address, if different is:
6001 NW 153	Street		
Suite 160			
Miami Lakes,	FL 33014		
	POSE he corporation is organized is:	chase inco	me properties
_		<u> </u>	注: <b>3</b>
		<del></del>	<b>京帝</b>
	The second secon		20
			0 0 0
	rial officers and/or director Carlos A. Perez, President		Hilda M.Perez, Vice President
Name and Title	6001 NW 153 Street	Name and Title	6001 NW 153 Street
Address		_ Address:	
	Suite 160 Miami Lakes, FL 33014		Suite 160 Miami Lakes, FL 33014
Name and Title:		Name and Title	÷
Address		Address:	
Name and Title:	·	Name and Title	:
Address		Address:	

Name an	d Title:	Name and Title:
Address		Address:
-	REGISTERED AGENT lorida street address (P.O. Box NOT acceptable) of Hilda M Perez	`the registered agent is:
Name:	6001 NW 153 Street , Suite 160	<b>三</b>
Address:	Miami Lakes, FL 33014	
ARTICLE VII	INCORPORATOR	
The name and ad	Idress of the Incorporator is:	0.6
Name:	Hilda M Perez	
Address:	6001 NW 153 Street , Suite 160	
11001003.	Miami Lakes, FL 33014	
	ned as registered agent to accept service of process am familiar with and gecept the appointment as reg	for the above stated corporation at the place designated in istered agent and agree to act in this capacity
		5/14/2013
	Required Signature/Registered Agent	Date
	ument and affirm that the facts stated herein are to Department of State constitutes a third degree felony	true. I am aware that the false information submitted in a v as provided for in s.817.155, F.S.
		5/14/2013
	Required Signature/Incorporator	Date
	X	