

P13000053385

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

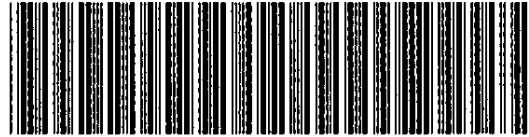
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200248393992

06/19/13--01028--005 \*\*70.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 JUN 19 PM 12:58

Ps 6/20/13

COVER LETTER

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

SUBJECT: Delavaco Management 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  
 \$87.50 Filing Fee, Certified Copy & Certificate of Status  
**ADDITIONAL COPY REQUIRED**

FROM: Jason Zielinski  
Name (Printed or typed)  
800 E. Broward Blvd. Suite 702  
Address  
Fort Lauderdale, FL 33301  
City, State & Zip  
954-524-6131  
Daytime Telephone number  
jzielinski@zielinski-associates.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. (Prof.)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLE I NAME**  
The name of the corporation shall be: Delavaco Management Inc.

13 JUN 19 PM 12:58

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address

Mailing address, if different is:

2300 E Las Olas Blvd  
Floor 5  
Fort Lauderdale, FL 33301

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is: any and all legal business

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE IV SHARES** 1000  
The number of shares of stock is: \_\_\_\_\_

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:	<u>Andrew DeFrancesco - Director</u>	Name and Title:	_____
Address	<u>2300 E Las Olas Blvd</u>	Address:	_____
	<u>Floor 5</u>		_____
	<u>Fort Lauderdale, FL 33301</u>		_____

Name and Title:	<u>Dyanne Cardoza - Secretary</u>	Name and Title:	_____
Address	<u>2300 E Las Olas Blvd</u>	Address:	_____
	<u>Floor 5</u>		_____
	<u>Fort Lauderdale, FL 33301</u>		_____

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

FILED (cont.)  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

13 JUN 19 PM 12:58

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:

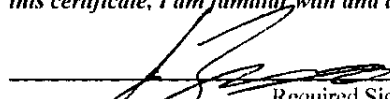
Name: Jason Zielinski, Esq.  
Address: 800 E. Broward Blvd. Suite 702  
Fort Lauderdale, FL 33301

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:


Name: Jason Zielinski, Esq.  
Address: 800 E. Broward Blvd. Suite 702  
Fort Lauderdale, FL 33301

*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*

  
\_\_\_\_\_  
Required Signature/Registered Agent

06-18-2013  
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.*

  
\_\_\_\_\_  
Required Signature/Incorporator

06-18-2013  
Date