

P1300053385

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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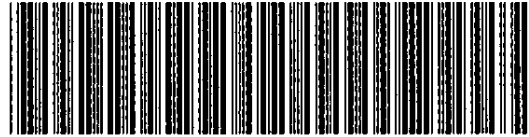
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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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. (Profitable Corporation)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME

The name of the corporation shall be: Delavaco Management Inc.

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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: Andrew DeFrancesco - Director

Name and Title: _____

Address 2300 E Las Olas Blvd

Address: _____

Floor 5

Fort Lauderdale, FL 33301

Name and Title: Dyanne Cardoza - Secretary

Name and Title: _____

Address 2300 E Las Olas Blvd

Address: _____

Floor 5

Fort Lauderdale, FL 33301

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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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:

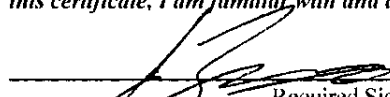
Name: Jason Zielinski, Esq.
Address: 800 E. Broward Blvd. Suite 702
Fort Lauderdale, FL 33301

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