

10/29/2031 06:49

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Florida Department of State
Division of Corporations
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DIVISION OF CORPORATIONS

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To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305) 552-5973
Fax Number : (305) 220-1440

****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
D. SALES GROUP CORP.

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 DEC 17 PM 4:54

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

D. Sales Group Corp.**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

9455 Ivy Brook Run #1007
Fort Myers FL
33913**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any AND ALL Lawful
Business**ARTICLE IV SHARES**

The number of shares of stock is:

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

Name and Title:

IVAN A. Gomez

Name and Title:

Address

9455 Ivy Brook Run #1007

Address:

Fort Myers FL 33913PRESIDENT

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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DIVISION OF CORPORATIONS

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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: IVAN A. GOMEZ
Address: 9455 Ivy Brook Run #1007
FORT MYERS FL 33913

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Name: IVAN A. GOMEZ
Address: 9455 Ivy Brook Run #1007
FORT MYERS FL 33913

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

X	<u></u>	<u>12-17-13</u>
	Required Signature/Registered Agent	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.

X	<u></u>	<u>12-17-13</u>
	Required Signature/Incorporator	Date

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