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Florida Department of State
Division of Corporations
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

APPROVED AND FILED

FLORIDA PROFIT/NON PROFIT CORPORATION
DTI ARCHITECTURAL SERVICES, INC.

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

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APPROVAL AND FILING
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(1)

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME
The name of the corporation shall be: DTI Architectural Services, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address	Mailing address, if different is:
18991 SW 15th Street	18991 SW 15th Street
Pembroke Pines, FL 33029	Pembroke Pines, FL 33029

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Architectural services and related business

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Luis B. Flores, President
Address: 18991 SW 15th Street, Pembroke Pines, FL 33029

Name and Title: Cecilia Flores, Vice President
Address: 18991 SW 15th Street, Pembroke Pines, FL 33029

Name and Title: Luis B. Flores, Secretary
Address: 18991 SW 15th Street, Pembroke Pines, FL 33029

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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: Luis B. Flores

Address: 18991 SW 15th Street

Pembroke Pines, FL 33029

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Luis B. Flores

Address: 18991 SW 15th Street

Pembroke Pines, FL 33029

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

_____ 11 | 17 | 14

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.

_____ 11 | 17 | 14

Required Signature/Incorporator — Date

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