P/S000/17226

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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Special Instructions to Filing Officer:
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TO ACKNOWLEDGE SUFFICIENCY OF FILIN

DEPARTMENT OF SIGN

15 FEB 20 PM 3: 4

COVER LETTER

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

SUBJECT:	Dimitri Compan (PROPOSED CORPORA	y Inc	
	(PROPOSED CORPORA	ABNAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d 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 CO	PY REQUIRED
FROM:	Name	•• ,	
	2204 Altoons	Address	·
	Tall F/ City,	32309 State & Zip	
	<u>850 556</u> Daytime T	- 9555 elephone number	
	Greekpetra a E-mail address: (to be use	A DL . COM d 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. (Profit)



e name of the corporation shall be: Dimitri Comparticle II PRINCIPAL OFFICE Principal street address		,	15 FEB 20 PM 3 Mailing address, if different is: SECRETARY OF SER TALLAHASSEE FLOOR	- : ३: भट
	= Altoons Dr =/ 32309		IALLAMASSEE ELOG	HDA
purpose for which the	POSE e corporation is organized is:		m of homes 4	,
FICLE IV SHA	RES			
number of shares of s	tock is: / () () e a		le:	
TICLE V INIT	tock is: / () () e a	Name and Tit	le:	4
TICLE V INIT Name and Title: Address	tock is: 100 ea IAL OFFICERS AND/OR Lec Patrandis 2204 Altoon Tall, Fl 32	Name and Tit Address: Name and Tit	_	

Name and Title:		Name and Title:	
Address		Address:	
		<u> </u>	
		_	
	ISTERED AGENT treet address (P.O. Box NOT acceptable) o	of the registered agent is:	
	Lee Petrandis		
Address:	2204 Altoona Dr	<u>.</u>	
	Tall, 17 32309	_	
ARTICLE VII INC	<u>ORPORATOR</u>		
The name and address	of the Incorporator is:		
Name:	Lee Petrandis	_	
Address: _	2204 Altona	<u>n</u>	
, –	Tall 19 32309	 -	
Having been named as this certificate, I am fan	registered agent to accept service of proces illiar with and accept the appointment as re	s for the above stated corpor gistered agent and agree to a	ration at the place designated in ect in this capacity
	Required Signature/Registered Agent		2-20-15
	Required Signature/Registered Agent		Date
	and affirm that the facts stated herein are ment of State constitutes a third degree felo		
	Required Signature/Incorporator		2.20.15
	Required Signature/Incorporator		Date