

P15000064735

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15 JUL 29 PM 6:21  
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TALLAHASSEE, FLORIDA

TE-Bush ALB 12315

## COVER LETTER

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

**SUBJECT:** Daynelis Noa PA

(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:** Daynelis Noa

Name (Printed or typed)

3162 Commodore Plaza, Suite 3AB

Address

Miami, FL 33133

City, State & Zip

(305) 443-2664

Daytime Telephone number

Daynelis.Noa@gmail.com

E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

~~July 8, 2015~~ 7.27.15

DAYNELIS NOA  
3162 COMMODORE PLAZA STE 3AB  
MIAMI, FL 33133

SUBJECT: DAYNELIS NOA PA  
Ref. Number: W15000046013

RECEIVED  
15 JUL 29 AM 11:12  
TALLAHASSEE, FLORIDA

We have received your document for DAYNELIS NOA PA and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A copy of a license or other legal authorization verifying the rendering of a personal service must accompany your articles of incorporation as a professional association.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch  
Regulatory Specialist II

Letter Number: 515A00014253

In response to this letter, we have amended the name of the corporation from PA to Inc.

Very truly yours  
Daynelis NOA

**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: Daynelis Noa Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

3162 Commodore Plaza

Suite 3AB

Miami, FL 33133

Mailing address, if different is:

5280 SW 158 Avenue

Miami, FL 33185

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Professional secretarial and administrative services and any and all other related business permitted under the laws of the State of Florida and the United States of America.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Daynelis Noa, President

Address 5280 SW 158 Avenue

Miami, FL 33185

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

FILED  
15 JUL 29 PM 4:21  
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: Francisco J. Ortega, Esq.  
Address: 3162 Commodore Plaza, Suite 3AB  
Miami, FL 33133

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15 JUL 29 PM 4:21  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**ARTICLE VII INCORPORATOR**

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

Name: Francisco J. Ortega, Esq.  
Address: 3162 Commodore Plaza, Suite 3AB  
Miami, FL 33133

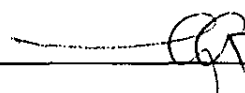
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

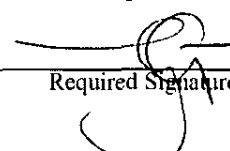
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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

6. 29.15  
\_\_\_\_\_  
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

6. 29.15  
\_\_\_\_\_  
Date