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COVER LETTER

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

SUBJECT: E L DAGUS CORP

(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: ERNESTO LAVISTADA

Name (Printed or typed)

4141 NORTH MIAMI AVE STE 305

Address

MIAMI, FL 33127

City, State & Zip

305-619-5270

Daytime Telephone number

ELDAGUSCORP@HOTMAIL.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. (Profit)

ARTICLE I NAME

The name of the corporation shall be: E L DAGUS CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4141 NORTH MIAMI AVE STE 305

4141 NORTH MIAMI AVE STE 305

MIAMI, FL 33127

MIAMI, FL 33127

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Corporate purpose is "Any and all lawful business"

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ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ERNESTO LAVASTIDA P/S

Name and Title: _____

Address 4141 NORTH MIAMI AVE

Address: _____

STE 305

MIAMI, FL 33127

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: ERNESTO LAVASTIDA

Address: 4141 NORTH MIAMI AVE STE 305

MIAMI, FL 33127

ARTICLE VII INCORPORATOR

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

Name: ERNESTO LAVASTIDA

Address: 4141 NORTH MIAMI AVE STE 305

MIAMI, FL 33127

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 09/17/2015 (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

09/17/2015

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

09/17/2015

Date