

P/6000044284

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/23/16

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

ARTICLE I NAME Ariel Dent Copr.
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
Principal street address Mailing address, if different is:
2611 hawthorn ln _____

ARTICLE III PURPOSE In order to work on my own personal account.
The purpose for which the corporation is organized is: _____
This will be a corp under my name with no other employee besides me. I plan on working under my own terms and be
my own boss. If there are any changes to this corporation, I will notify and make the changes accordingly.

ARTICLE IV SHARES
The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____

Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____

Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____

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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: Ariel Rodriguez

Address: 2611 hawthorn ln kissimmee fl 34743

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ARTICLE VII INCORPORATOR

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

Name: Ariel Rodriguez

Address: 2611 hawthorn ln kissimmee fl 34743


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

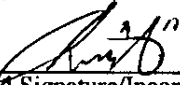


Required Signature/Registered Agent

05/11/15

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

05/11/15

Date