

**P16000077516**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H16000234903 3)))



H160002349033ABC

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

**To:**

Division of Corporations  
Fax Number : (850)617-6381

**From:**

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION  
DOMESTIC QUALITY SERVICES, INC.**

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

RECEIVED

16 SEP 21 PM 4:16

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
ELECTRONIC FILING SERVICES

16 SEP 21 12:38:53

16 SEP 21 12:38:53

mm

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 (Profit)

H16000234903

**ARTICLE I NAME:** The name of the corporation is:Domestic Quality Services, Inc.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

8952 SW 38<sup>th</sup> StMiami, FL33165**ARTICLE III SHARES:** The number of shares of stock is:100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Ariel Urreli Diaz (P)Livska Alejo Gutierrez (VP)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

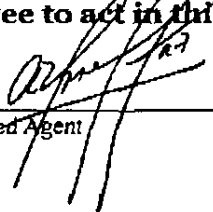
Ariel Urreli Diaz8952 SW 38<sup>th</sup> StMiami FL 33165**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Ariel Urreli Diaz8952 SW 38<sup>th</sup> StMiami FL 33165

H16000234903

H160002349 03

**Required Signatures:**

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

  
\_\_\_\_\_  
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.

  
\_\_\_\_\_  
Incorporator\_\_\_\_\_  
Date

16 SEP 21 17:10:53

SEP 21 2016

H160002349 03