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(Re	questor's Name)	
(Address)		
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

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

SUBJECT: NO	DAL SERVIC					
	•	PROPOSED CORPORA	TE NAME – <u>MUST INCLU</u>	JDE SUFFIX)		
Enclosed are an	original and	one (1) copy of the art	ticles of incorporation and	a check for:	-	
☐ \$70.0 Filing Fe	ee Filing		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
			ADDITIONAL CO			
					_	
FROM:	YOAN NOD	AL				≓ø.
		Nam	e (Printed or typed)		<u> </u>	(<u></u>) i.z.,
	16325 SW 79	TER			16 NOV -7	<u> </u>
			Address			- Zm
	MIAMI, FL 3	3193			암 2:	105 105 105
		City,	State & Zip		2: 19	꼼
	786-457-6022	2				مرو

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

Daytime Telephone number

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

NODALSERVICES75@GMAIL.COM

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

he name of the corpo			
	Principal street address	Mailing addre	ess, if different is:
6325 SW 79 TER			
Miami, Fl 33193			
IRTICLE III PUR The purpose for which	DOCE	IY AND ALL LAWFUL BUSINESS.	
			16
			2
the number of shares	of stock is:	<u>ORS</u>	FM 2: 19
<i>RTICLE V INIT</i> Name and Ti	of stock is: IAL OFFICERS AND/OR DIRECTS tle: 16325 SW 79 TFR	<u>ORS</u> Name and Title:	FM 2: 19
The number of shares	of stock is:	<u>ORS</u> Name and Title:	FM 2: 19
The number of shares of the number of the number of the number of shares of the number of	of stock is: IAL OFFICERS AND/OR DIRECTO tle: YOAN NODAL P 16325 SW 79 TER	<u>ORS</u> Name and Title:	FM 2: 19
The number of shares of the nu	of stock is: IAL OFFICERS AND/OR DIRECTOR YOAN NODAL P 16325 SW 79 TER Miami, Fl 33193	<u>ORS</u> Name and Title:	FM 2: 19
The number of shares of the nu	of stock is: IAL OFFICERS AND/OR DIRECTOR YOAN NODAL P 16325 SW 79 TER Miami, Fl 33193	ORS Name and Title: Address: Name and Title:	FM 2: 19
The number of shares of the nu	IAL OFFICERS AND/OR DIRECTOR YOAN NODAL P 16325 SW 79 TER Miami, Fl 33193	ORS Name and Title: Address: Name and Title: Address:	FM 2: 19
The number of shares of the nu	of stock is: IAL OFFICERS AND/OR DIRECTO tle: YOAN NODAL P 16325 SW 79 TER Miami, Fl 33193	ORS Name and Title: Address: Name and Title: Address:	FM 2: 19

Name a	and little:	Name and Title:	· · · · · · · · · · · · · · · · · · ·
Address		Address:	
	· · · · · · · · · · · · · · · · · · ·	<u></u>	
A DOMESTIC COLUMN			
	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT acce	ptable) of the registered agent is:	
Name:	YOAN NODAL		16 SE
Address:	16325 SW 79 TER		16 KOV
	Miami, Fl 33193		1
			7
<u> 4RTICLE VII</u>	INCORPORATOR		<i>i</i> . ∴
The <u>name and</u>	address of the Incorporator is:		19
Name:	YOAN NODAL		
Address:	16325 SW 79 TER		
	Miami, Fl 33193		
<u>4<i>RTICLE VIII</i></u> Effective date. i	I EFFECTIVE DATE: if other than the date of filing:	(OPTIONA)	L)
	date is listed, the date must be specific an		
-			
Note: If the da the document's	te inserted in this block does not meet the a effective date on the Department of State's	pplicable statutory filing requirement records.	its, this date will not be listed as
Having been no	amed as registered agent to accept service of	f process for the above stated corpe	oration at the place designated in
mis cerujicaie, .	I am familiar with and accept the appointm	eni us regisiereu ugeni unu ugree io	
	D. Alexander		11/03/2016
	Required Signature/Registered A		Date
' submit this de locument to the	ocument and affirm that the facts stated he e Department of State constitutes a third deg	rein are true. I am aware that the ree felony as provided for in s.817.	false information submitted in a
	$//$ \sim \sim \sim		11/03/2016
Rea	uired Signature/Incorporator		Date

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COVER LETTER

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

SUBJECT: NODAL	SERVICES INC.		
Sobsect.	(PROPOSED CORPORA	TE NAME - <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:	NAN NODAL Nam 25 SW 79 TER	e (Printed or typed)	
		Address	
MIA	AMI, FL 33193		
	City	State & Zip	
786	-457-6022		
	Daytime 1	elephone number	
NO	DALSERVICES75@GMAIL.COM		
	E-mail address: (to be use	d for future annual report	notification)

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

Name a	Name and Title: Name and Title:	
Addres	· · · · · · · · · · · · · · · · · · ·	Address:
	REGISTERED AGENT	•
The <u>name and F</u>	Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Name:	YOAN NODAL	_
Address:	16325 SW 79 TER	
	Miami, Fl 33193	·
ARTICLE VII	<u>INCORPORATOR</u>	
The name and a	ddress of the Incorporator is:	
Name:	YOAN NODAL	
Address:	16325 SW 79 TER	
	Miami, Fl 33193	<u></u>
Effective date, it	EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific and can	
Note: If the date the document's of	e inserted in this block does not meet the applical effective date on the Department of State's record	ole statutory filing requirements, this date will not be listed as is.
Having been na this certificate, I	med as registered agent to accept service of proc am familiar with and accept the appointment as	ess for the above stated corporation at the place designated in registered agent and agree to act in this capacity
	(a)	11/03/2016
	Required Signature/Registered Agent	Date
I submit this do document to the	cument and affirm that the facts stated herein a Department of State constitutes a third degree fe	re true. I am aware that the false information submitted in a lony as provided for in s.817.155, F.S.
		11/03/2016
Requ	ired Signature/Incorporator	Date