

P18000020543

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

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

From:

Account Name : ASSOCIATED TAX CONSULTANTS GROUP, INC.
Account Number : I20110000056
Phone : (305) 823-9292
Fax Number : (305) 824-0703

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

Email Address:

PAYMENT@TAXCONSULTANTSGROUP.COM

FLORIDA PROFIT/NON PROFIT CORPORATION

AYO DIGITAL MEDIA INC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

N. SAMS

MAR 06 2018

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FILED
18 MAR -5 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

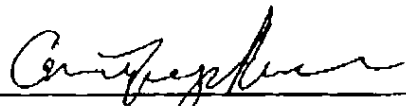
Florida Department of State

Attention: New Filings Section

Date: MARCH 5, 2018

To whom it may concern:

This is to advise you that the owners of AYO DIGITAL MEDIA INC. Of Doc P16000057798 are the same owners of the attached articles of incorporation. We have dissolved the company and have no intention of reopening it. Thank you for your help in this matter.



ALLAN ANDERSON, INCORPORATOR

H18000071966 3

H18000071966 3

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: AYO DIGITAL MEDIA INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

17125 NORTH BAY RD # 3503

SUNNY ISLES BEACH, FL 33160

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

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ARTICLE IV SHARES

The number of shares of stock is: 500 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ALLAN ANDERSON, DPST

Name and Title: _____

Address 17125 NORTH BAY RD # 3503

Address: _____

SUNNY ISLES BEACH, FL 33160

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

H18000071966 3

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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: EDWARD GARCIA INC
Address: 6163 MIAMI LAKES DR E
MIAMI LAKES, FL 33014

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ALLAN ANDERSON
Address: 17125 NORTH BAY RD # 3503
SUNNY ISLES BEACH, FL 33160

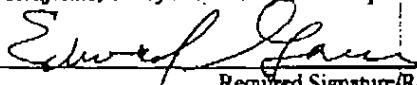
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 03/05/2018 (OPTIONAL)

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

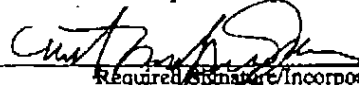


Required Signature/Registered Agent

3/5/18

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

3-5-2018

Date

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