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6/7/2019

PIB000046853

Florida Department of State  
Division of Corporations  
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FLORIDA PROFIT/NON PROFIT CORPORATION  
DOLPHIN CONTRACTORS INC

Certificate of Status	0
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Page Count	03
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2019 JUN 7 PM 12:22

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Corporate Filing Menu

Help

**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: DOLPHIN CONTRACTORS INC**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

6227 SW 14 STMIAMI, FL 33144**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: FREDDY CAMPBELL (P)

Name and Title: \_\_\_\_\_

Address 6227 SW 14 ST

Address: \_\_\_\_\_

MIAMI, FL 33144

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

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COUNTY OF MIAMI  
CLERK OF COUNTY

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: FREDDY CAMPBELL  
Address: 6227 SW 14 STREET  
MIAMI, FL 33144

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: FREDDY CAMPBELL  
Address: 6227 SW 14 STREET  
MIAMI, FL 33144

**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 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*

*Freddy Campbell*

4/24/2019

Required Signature/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.*

*Freddy Campbell*

4/24/2019

Required Signature/Incorporator

Date

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JUN 10 2019  
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