

P19000069308

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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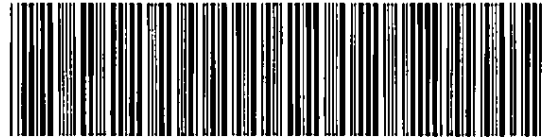
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FL

T. BURCH
SEP 11 2019

W19-76975

COVER LETTER

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

SUBJECT: ~~Corporation DAGO Inc~~ DAGO LOGISTICS INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Anelin Diaz Echezabal

Name (Printed or typed)

11957 SW 110th Street Cir S

Address

Miami, FL. 33186

City, State & Zip

786-315-8990

Daytime Telephone number

oriolgarcia2016@yahoo.com

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

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 19, 2019

ANELIN DIAZ ECHEZABAL
11957 SW 110TH STREET CIR S
MIAMI, FL 33186

SUBJECT: CORPORATION DAGO INC
Ref. Number: W19000076975

(CORRECTED to:
DAGO LOGISTICS, INC.

We have received your document for CORPORATION DAGO INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L13000018000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

DANIEL L O'KEEFE
Regulatory Specialist II

Letter Number: 119A00017115

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:

~~Corporation DAGO Inc~~

DAGO LOGISTICS INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

11957 SW 110th Street Cir S

Miami, FL. 33186

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Amazon Packages Delivery

ARTICLE IV SHARES

The number of shares of stock is:

One

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Anelin Diaz Echezabal, President

Name and Title: _____

Address

11957 SW 110th Street Cir S

Address: _____

Miami, FL. 33186

Name and Title: _____

Name and Title: _____

Address

Address: _____

Name and Title: _____

Name and Title: _____

Address

Address: _____

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TALLAHASSEE, FL

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: Anelin Diaz Echezabal
Address: 11957 SW 110th Street Cir S
Miami, FL 33186

ARTICLE VII INCORPORATOR

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

Name: Anelin Diaz Echezabal
Address: 11957 SW 110th Street Cir S
Miami, FL 33186

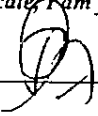
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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 07/25/2019 (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

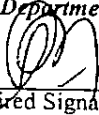


Required Signature/Registered Agent

07/25/2019

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

07/25/2019

Date