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FAX No.

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10/29/2019

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

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FLORIDA PROFIT/NON PROFIT CORPORATION
DISCOUNT DEPOT CORPORATION

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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Corporate Filing Menu

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N. SAMS

OCT 30 2019



October 30, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations
EXPRESS CORPORATE FILING SERVICE INC.

SUBJECT: DISCOUNT DEPOT CORPORATION
REF: W19000095878

DISCOUNT DEPOT CORPORATION
TALLAHASSEE, FLORIDA

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Nadira D McClees-Sams
Regulatory Specialist II
New Filing Section

FAX Aud. #: H19000319454
Letter Number: 119A00022361

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

ARTICLE I NAME

DISCOUNT DEPOT CORPORATION
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address
4612 NORTH HIATUS RD.
SUNRISE, FL. 33351

Mailing address, if different is:
4612 NORTH HIATUS RD.
SUNRISE, FL. 33351

ARTICLE III PURPOSE

ANY AND ALL LAWFUL BUSINESS
The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES

SHARES: 100
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: HENRY VARGAS (P/D)

Address: 151 N. NOB HILL RD.
STE: 381

PLANTATION, FL 33324

Name and Title: _____

Address: _____

Name and Title: EYRA SILVA PENA (T/D)

Address: 151 N. NOB HILL RD.
STE: 381

PLANTATION, FL 33324

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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: HENRY VARGAS
Address: 151 N. NOB HILL RD. STE: 381
PLANTATION, FL 33324

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: HENRY VARGAS
Address: 151 N. NOB HILL RD. STE: 381
PLANTATION, FL 33324

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:

Required Signature/Registered Agent

10/28/2019

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

10/28/2019

Date

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TALLAHASSEE, FLORIDA