

P19000052644

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H19000325741 3)))



H190003257413ABC%

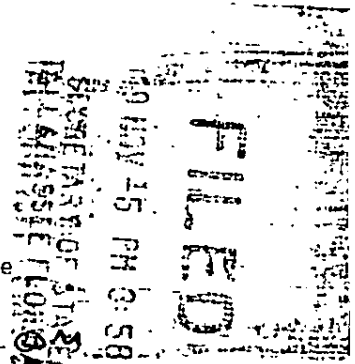
Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From:
Account Name : ACCOUNTING & TAX SERVICES OF SOUTH FL
Account Number : I20170000071
Phone : (305)669-5115
Fax Number : (305)669-5117

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

Email Address: gicadnic@accountingtaxfl.com



**FLORIDA PROFIT/NON PROFIT CORPORATION
DOS CABEZAS, CORP.**

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

Electronic Filing Menu

Corporate Filing Menu

Help

H190003257413

CERTIFICATE OF INCORPORATION

ARTICLES OF INCORPORATION FOR

DOS CABEZAS CORP

We the undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation privileges, and immunities of a corporation for profit, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I

The name of the corporation shall be:

DOS CABEZAS CORP

ARTICLE II

The corporation will engage in the business of: All lawful business permitted under the laws of the state of Florida in the United States.

ARTICLE III

The corporation is authorized to issue one hundred (100) shares of \$10.00 par value Common Stock, which shall be designated "Common Shares" of Common Stock by both the president and vice-president. Stocks will have no value if not signed by the president and vice-president.

ARTICLE IV

The amount of capital with which this corporation will begin business shall not be less than one Thousand (\$1000.00) dollars,

ARTICLE V

This corporation is to have perpetual existence.

*Prepared by: Gladys Laviña-Ortega
Accounting & Tax Services of South FL, Corp
6080 SW 40 Street, Suite 10
Miami, FL 33155
Tel: 305-669-5115 Fax: 305-669-5117*

H 190003287413

ARTICLE VI

The principal office of this corporation shall be:

**5501 N FEDERAL HWY STE 5
BOCA RATON, FL 33487**

The mailing address of the Company is:

**820 NW 21ST WAY
DELRAY BEACH, FL 33445**

ARTICLE VII

The number of the Board of Directors of the Corporation shall not be less than one person. The names and post office addresses of the First Board of Directors, who subject to the provisions of the Certificate of Incorporation, the By-laws and the Acts of Legislature, shall hold office for the Corporation are:

NAME

TITLE

**ALEJANDRA BETANCUR
5501 N FEDERAL HWY STE 5
BOCA RATON, FL 33487**

PRESIDENT

**ADRIANA FITTER
5501 N FEDERAL HWY STE 5
BOCA RATON, FL 33487**

VICE PRESIDENT

The Board of Directors will be able to utilize all powers granted them by law in order to direct the Corporation as they see fit.

H-19000325743

ARTICLE VIII

The corporation shall have the right and power to, from time to time, determine whether and to what extent, at what time and places and under what conditions and regulations the accounting books of this Corporation, other than the stock book, or any of them, shall be open to The inspection of the stockholders, and no stockholders shall have any right of inspections of any account book or document of this Corporation, except as conferred by statute, unless authorized by resolution of the stockholders or Board of Directors. The Corporation, in its By-laws confers power upon its Board of Directors or Officers, in addition to the foregoing and in addition to the powers authorized and expressly conferred by Statute.

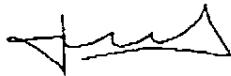
The corporation reserves the rights to amend, alter, change or repeal any provisions contained in this Certificate of Incorporation in the manner now hereafter prescribed by statute, and all rights conferred upon the stockholders herein or granted subject to this reservation.

ARTICLE IX

The name and address of the Incorporator Shall be:

**ADRIANA FITTER, Incorporator
5501 N FEDERAL HWY STE 5
BOCA RATON, FL 33487**

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

11/04/19
Date

1190003287413

**CERTIFICATE OF ACKNOWLEDGMENT
OF REGISTERED AGENT
FOR SERVICE AND PROCESS WITHIN THE
STATE OF FLORIDA**

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

That: DOS CABEZAS CORP

*Is qualified to do business under the laws of the State of Florida, with its
REGISTERED OFFICE at:*

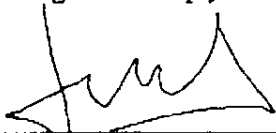
**5501 N FEDERAL HWY STE 5
BOCA RATON, FL 33487**

And has appointed: ADRIANA FITTER

as it's agent to accept services of process within the State.

ACKNOWLEDGMENT

Having been named as Registered Agent to accept service of process for the above stated Corporation at the place designated in the Certificate, I hereby accept to act in this capacity and agree to comply with the provisions of said Act relative to keeping said office.



ADRIANA FITTER, Registered Agent