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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : TRAMILEX LLC Account Number : I20150000086 Phone : (786)469-9163 Fax Number : (305)848-3716

**Enter the email address for this business entity to be used fo annual report mailings. Enter only one email address please Email Address:____

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FLORIDA PROFIT/NON PROFIT CORPORATION DIAMANTE JOY CORP

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

Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

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

DIA:	MANTE JOY CORP		
SUBJECT:	(PROPOSED CORPOR	ate name – <u>must incu</u>	UDE SUFFIX)
Enclosed are an o	original and one (1) copy of the ar	ticles of incorporation and	d a check for:
■ \$70.00 Filing Fea	\$78.75	\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	OPY REQUIRED
FROM:	Irley Romero Perez Nan 6341 SW 80th ST #2	ne (Printed or typed)	
	0017 011 0011 07 112	Address	
	MIANU, FL 33143	Saasa & 7:n	
	Cir	y, State & Zip	
	(305)848-3963		
	Daytime	Telephone number	
	E-mail address: (to be u	sed for future annual report	notification)

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

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ARTICLES OF INCORPORATION

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

E <u>II PRINCI</u> I	PAL OFFICE	3 K-717-	g address, if different is:
P	rincipal street address	Mailin SAME ADRES	
80th ST #2		3.440 1.01	
FL 33143			
			
E III PURPOS	SE corporation is organized is:	AND ALL LAWFUL BUSIN	ESS
ose for which the	e corporation is organized is:		
			
E IV SHARE ber of shares of s	Stock is:		
nber of shares of s	stock is:	<u>PRS</u>	
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Name ar	nd Title:	Name and Title:
Addres	5	Address:
ARTICLE VI _	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable	e) of the registered agent is:
Name:	IRLEY ROMERO PEREZ	<u> </u>
Address:	6341 SW 80th ST #2	<u></u>
Addiess.	MIAMI, FL 33143	
ARTICLE VII	<u>INCORPORATOR</u>	
The name and	address of the Incorporator is:	
Name:	IRLEY ROMERO PEREZ	
Address:	6341 SW 80th ST #2	
	MIAMI, FL 33143	
Effective date, (If an effective days after the	filing.)	(OPTIONAL) innot be more than five business days prior or 90 business chie statutors filing requirements, this date will not be listed as
Note: If the dathe document's	ate inserted in this block does not meet the applic s effective date on the Department of State's reco	able statutory filing requirements, this date will not be listed as rds.
Having been to this certificate,	named as registered agent to accept service of pr I am famillar with and accept the appointment t	ocess for the above stated corporation at the place designated in as registered agent and agree to act in this capacity
•	TRV	11/12/2019
	Required Signature/Registered Agent	Date
I submit this o	locument and affirm that the facts stated herein	are true. I am aware that the false information submitted in a
docum en t to th	the Department of State constitutes a third degree	felony as provided for in \$.817.133, r.s. 11/12/2019
- Ře	quired Signature/Incorporator	Date

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