

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

Please print this page and use it as a cover sheet. Type the filing number (shown below) at the top and bottom of all pages of the document.

(((H20000011323 3)))



H200000113233ABCM

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 : FANJUL ENTERPRISES LLC
Account Number : I20190000080
Phone : (305)603-8791
Fax Number : (877)503-6086

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

Email Address: _____

RECEIVED

2020 JAN 10 PM 4:08

DIVISION OF CORPORATIONS
TALLAHASSEE, FLSECRETARY OF STATE
TALLAHASSEE, FL

2020 JAN 10 AM 10:22

FILED

FLORIDA PROFIT/NON PROFIT CORPORATION
DESIGN AND TECHNOLOGY SOLUTIONS CORP

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

K. PAGE

JAN 13 2020

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: DESIGN AND TECHNOLOGY SOLUTIONS CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

20200 W DIXIE HWY SUITE 902

MIAMI, FL 33180

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ANY AND ALL LAWFULL PURPOSES

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: YANITSE BARAJAS-P

Name and Title: _____

Address: 2200 NE 4TH AVENUE APT PH03

Address: _____

MIAMI, FL 33137

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

FILED
2020 JAN 10 AM 10:22
SECRETARY OF STATE
TALLAHASSEE, FL

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

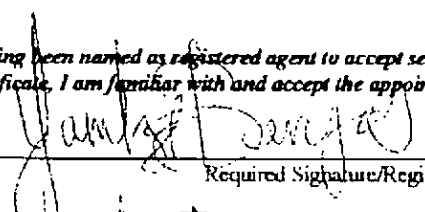
ARTICLE VI REGISTERED AGENTThe **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:Name: YANITSE BARAJASAddress: 2200 NE 4TH AVENUE APT PH03MIAMI, FL 33137**ARTICLE VII INCORPORATOR**The **name and address** of the Incorporator is:Name: YANITSE BARAJASAddress: 2200 NE 4TH AVENUE APT PH03MIAMI, FL 33137**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*

x

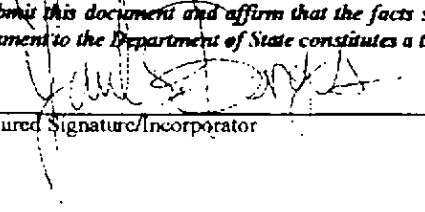


Required Signature/Registered Agent

01/01/2020

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.*

x



Required Signature/Incorporator

01/01/2020

Date**FILED**
2020 JAN 10 AM 10:22
SECRETARY OF STATE
TALLAHASSEE, FL