P20000003235

(Re	questor's Name)			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer				



JAN 2 1 1000 T. SCOTT



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January 16, 2020

NEVADA CORPORATE PLANNERS, INC.

SUBJECT: DEC GOLDMAN, INC. Ref. Number: W20000003650

Return to Rush Courier UC

We have received your document for DEC GOLDMAN, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information. http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/

Please return the corrected original and one copy of 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.

Tyrone Scott Regulatory Specialist II New Filings Section

Letter Number: 220A00001249

COVER LETTER

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

SUBJECT:	JBJECT: DEC GOLDMAN, INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFI				
•	(PROPOSED CORPORA	TE NAME - <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an orig	ginal and one (I) copy of the ar	ricles of incorporation and	d a check for:		
≅ \$70.00	□ \$78.75	☐ \$78.75	□ \$87.50		
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status		
	ADDITIONAL COPY R		PY REQUIRED		
	Nam 10785 W. Twain Ave., Sul	e (Printed or typed)			
	10700 VV. TWain AVO., Out	Address			
	Las Vegas, NV 89135				
	City	, State & Zip			
	702-367-7373				
	Celephone number				
	support@launchwithconfldence.com				
	E-mail address: (to be use	d for future annual report r	notification)		

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

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

TEH DO	MCIDAL APPICE		
<u>LE II PRI</u>	NCIPAL OFFICE Principal street address	1	Mailing address, if different is:
Frontierland Trial		58 Fron	tierland Trial
Vedra, FL	32081	Ponte \	/edra, FL 32081
LEIII PUR	RPOSE		
	ch the corporation is organized is:		
gage in any	lawful activity for which corporation	ons may be incorpo	orated in this state.
<u> </u>			
		 	
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7 23 577 677	. D.C.O.		
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mber of shares	of stock is: 100	•	Manny Goldman - Director
mber of shares	of stock is: 100 TIAL OFFICERS AND/OR DIRECTORS	•	Manny Goldman - Director 58 Frontierland Trial
Name and T	of stock is: 100 TIAL OFFICERS AND/OR DIRECTORS Title: Vania Goldman - Director	Name and Title:	
The V INT	of stock is: 100 TIAL OFFICERS AND/OR DIRECTORS Title: Vania Goldman - Director 58 Frontierland Trial	Name and Title:	58 Frontierland Trial
TLE V INT Name and T Address	of stock is: 100 TIAL OFFICERS AND/OR DIRECTORS Title: Vania Goldman - Director 58 Frontierland Trial	Name and Title: Address:	58 Frontierland Trial
T.E V INT Name and T Address	of stock is: 100 TIAL OFFICERS AND/OR DIRECTORS Title: Vania Goldman - Director 58 Frontierland Trial Ponte Vedra, FL 32081	Name and Title: Address: Name and Title:	58 Frontierland Trial Ponte Vedra, FL 32081
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Name and Ti Address Name and Ti Address	of stock is: 100 TIAL OFFICERS AND/OR DIRECTORS Title: Vania Goldman - Director 58 Frontierland Trial Ponte Vedra, FL 32081	Name and Title: Address: Name and Title: Address: Name and Title: Name and Title:	Ponte Vedra, FL 32081

Name and	Title:	Name and Title:
.' : Address		Address:
	EGISTERED AGENT rida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	NRAI Services, Inc.	
Address:	1200 South Pine Island	
	Plantation, FL 33324	•
ARTICLE VII II	NCORPORATOR	
The name and add	ress of the Incorporator is:	
Name:	Nevada Corporate Planners, Inc.	
Address:	10785 W. Twain Ave., Suite 210	
	Las Vegas, NV 89135	
Effective date, if of	EFFECTIVE DATE: ther than the date of filing: te is listed, the date must be specific and cauno	(OPTIONAL) t be more than five days prior or 90 days after the
	nserted in this block does not meet the applicable ective date on the Department of State's records.	statutory filing requirements, this date will not be listed as
certificate. I am fai	niliar with and accept the appointment as register.	or the above stated corporation at the place designated in this ed agent and agree to act in this capacity
9	Required Signature Registered Agent	1/16/20
7	Required Signature Registered Agent	Date
I submit this docu	partition of State constitutes a third degree felony	true. I am aware that the false information submitted in a as provided for in \$.817.155, F.S.
Required Signature	A / *V Incorporator	Date 1/14/20