

P20000003456

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



PICK-UP



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MAIL

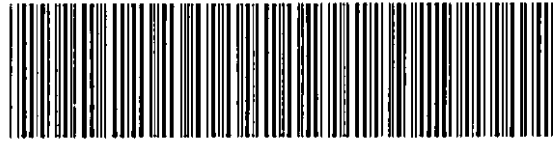
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

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2020 JAN 21 AM 9:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Department of State

Division of Corporations

Stealth Courier LLC

1531 Commonwealth Business Dr.

Ste 105Soluciones

Tallahassee, Fl. 32303

850-294-5632

Stealth Courier Box

Company:

Requester: Dominion Investment & Finance Inc (Corp SVCS Intl)

COVER LETTER

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

SUBJECT: DOMINION INVESTMENT & FINANCE INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75	<input type="checkbox"/> \$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
ADDITIONAL COPY REQUIRED	

FROM: CORP SVCS INTL
Name (Printed or typed)

7050 W PALMETTO PARK RD. #15-300.
Address

BOCA RATON, FL 33433

305-503-5983
Daytime Telephone number

OPERATIONS@ACHIEVEGEA.COM
E-mail address: (to be used for future annual report 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)

ARTICLE I NAME

The name of the corporation shall be: DOMINION INVESTMENT & FINANCE INC

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

Text

Mailing address, if different is:

5550 GLADES ROAD. #300.

7050 W PALMETTO PARK RD. #15-300.

BOCA RATON FL 33431

BOCA RATON, FL 33433

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

M&A AND CORPORATE FINANCE ADVISORS.

ARTICLE IV SHARES

The number of shares of stock is: 1,500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JUAN C MARTINEZ, PRESIDENT

Name and Title: _____

Address 9907 THREE LAKES CIRCLE.

Address: _____

BOCA RATON, FL 33428

Name and Title: JORGE E COSTA ROSENBERG, DIRECTOR

Name and Title: _____

Address 9907 THREE LAKES CIRCLE.

Address: _____

BOCA RATON, FL 33428

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2020 JAN 21 AM 9:45

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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: CARLA MARCELO
Address: 7050 W PALMETTO PARK RD. #15-300.
BOCA RATON, FL 33433

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: VICTOR OJEDA
Address: 7050 W PALMETTO PARK RD. #15-300.
BOCA RATON, FL 33433

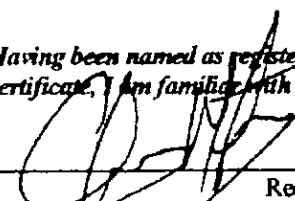
ARTICLE VIII EFFECTIVE DATE:

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

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

Date

JANUARY 20, 2020