

7/21/2020

P20000054183
 Division of Corporations
 Florida Department of State
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FLORIDA PROFIT/NON PROFIT CORPORATION
 D' MARIA, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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

ARTICLE I NAMEThe name of the corporation shall be: D' MARIA, INC.**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

3600 SW 57 AVEMIAMI, FL 33155**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: MARIANA RINCON (P)

Name and Title: _____

Address 3600 SW 57 AVE

Address: _____

MIAMI, FL 33155Name and Title: ANA LUCIA RAMIREZ (VP)

Name and Title: _____

Address 3600 SW 57 AVE

Address: _____

MIAMI, FL 33155

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: ANA LUCIA RAMIREZ

Address: 3600 SW 57 AVE

MIAMI, FL 33155

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: ANA LUCIA RAMIREZ

Address: 3600 SW 57 AVE

MIAMI, FL 33155

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*

<u>ANA LUCIA RAMIREZ</u>	<u>07/20/2020</u>
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.817.135, F.S.

<u>ANA LUCIA RAMIREZ</u>	<u>07/20/2020</u>
Required Signature/Incorporator	Date

FILED
 2020 JUL 21 AM 11:30
 CLERK OF STATE
 TALLAHASSEE, FLORIDA