7/29/2020

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FLORIDA PROFIT/NON PROFIT CORPORATION **DIAMOND SHINE 2020 CORP**

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Electronic Filing Menu

Corporate Filing Menu

Help

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

ARTICLE I	NAME BLAMOND DUNG 2022				
The name of th	e corporation shall be: DIAMOND SHINE 2020 (LORP			
ARTICLE II	PRINCIPAL OFFICE Principal street address	Mailing address, i	Mailing address, if different is:		
8821 SW 142	AVE APT 13				
MAICHAI ET 31	3126				
MIAMI, FL 3					
ARTICLE III The purpose for	PURPOSE which the corporation is organized is: ANY AND	ALL LAWFUL BUSINESS			
• •	, , , , , , , , , , , , , , , , , , , ,				
		91 g 1914 - 1914			
			50 2		
			0		
ARTICLE IV	SHARES shares of stock is: 100		29 \$\$\$		
i ne number oi	shares of stock is:		70		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTORS		7:		
		Name and Title	新 第 5		
Name	and Title: JIMMY JESUS RIVERO CAMEJO (P)	. Name and Thie.			
Addre	8821 SW 142 AVE	Address:			
	APT 13				
	MIAMI, FL 33186				
Name	and Title: GLADYS ADRIANA VELASQUEZ FLORE	S (Willing and Title:			
Addre	ess 8821 SW 142 AVE	Address:			
	ADT 12				
		ANT PROMISE TO THE PROPERTY OF			
	MIAMI, FL 33186				
Name	and Title	Name and Title:			
Name and Title:					
Addr	ess	Address:			

Name ar	d Title:	Name and Title:	
Address	S	Address:	
ARTICLE VI The name and F	REGISTERED AGENT lorido street address (P.O. Box NOT acceptable) of the registered agent is:	• •
Name:	JIMMY JESUS RIVERO CAMEJO		
Address:	8821 SW 142 AVE APT 13	_	
	MIAMI FL 33186		
<u>ARTICLE VII</u>	INCORPORATOR		
The name and a	iddress of the Incorporator is:		20
Name:	JIMMY JESUS RIVERO CAMEJO		ZO JUL 2
Address:	8321 SW 142 AVE APT 13		¥: • • • • • • • • • • • • • • • • • • •
	MIAMI, FL 33186	-	
ARTICLE VIII	EFFECTIVE DATE:		7: 5
Effective date, i (If an effective filing.)	f other than the date of filing:	nnot he more than five days prior	r or 90 days after the
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Having been na certificate, I am	med us registered aftent to accept service of proce familiar with and accept the appointment as regi	ss for the above stated corporation of stered agent and agree to act in this	it the place designated in thi capacity
	() W - Y		Date
	Required Signature/Registered Agent	. A submit 6th	
I submit this do document to the	ocument and affirm that the facts stated herein Department of Sidte constitutes a third degree fi	are true. I am aware that the false dony as provided for in s.817.155, k	s information submitted in (S.
Required Signa	me/Incorporation / Pt	Date	