

P20000058124

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

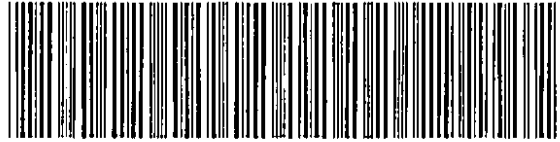
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300349439333

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2020 AUG -3 AM 10:40

FILED



2020 AUG -3 PM 1:07

RECEIVED

01/13/20

# Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 8/3/2020

**\*\*WALK IN\*\***

ENTITY NAME DL COMMERCIAL REAL ESTATE INC.

DOCUMENT NUMBER \_\_\_\_\_

**\*\*PLEASE FILE THE ATTACHED AND RETURN\*\***

XXXX

*Plain Copy*

*Certified Copy*

*Certificate of Status*

**\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\***

*Certified Copy of Arts & Amendments*

*Certified Copy of Arts & Amendments Complete File (Including Annual Reports)*

*Certificate of Status*

*Certificate of Status Reflecting: \_\_\_\_\_*

**\*\*APOSTILLE / NOTARIAL CERTIFICATION\*\***

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL OWED \$ 70.00

ACCOUNT # 120140000108  
United Corporate  
Services, Inc.

*Keith Leppard*

Please call Tina at the above number for any issues or concerns. Thank you so much!

**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: DL COMMERCIAL REAL ESTATE INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

102 4th Avenue

St. Pete Beach, FL 33706

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: real estate activity

to engage in any lawful act or activity permitted under the business corporation law of the state of Florida.

**ARTICLE IV SHARES**

The number of shares of stock is: 200

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Gil DiMola - Sole Officer/Director

Name and Title: \_\_\_\_\_

Address 102 4th Avenue

Address: \_\_\_\_\_

St. Pete Beach, FL 33706

Name and Title: Denine Dimola- Secretary

Name and Title: \_\_\_\_\_

Address 102 4th ave

Address: \_\_\_\_\_

St Pete, FL 33706

St. Pete Beach 33706

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

**FILED**  
2020 AUG -3 AM 10:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: Gil DiMola  
Address: 102 4th Avenue  
St. Pete Beach, FL 33706

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Gil DiMola  
Address: 102 4th Avenue,  
St. Pete Beach, FL 33706


**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  7/1/2020  
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.*

X  7/1/2020  
Required Signature/Incorporator Date