

12/28/2020

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-0821
Fax Number : (850)558-1515

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
DAAA, INC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

J. FASON**DEC. 29. 2020**

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

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

SUBJECT: DAAA, 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

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Marjorie E. Wolasky

Name (Printed or typed)

9400 S. Dadeland Blvd. Suite 604

Address

Miami, Florida 33156

City, State & Zip

305-670-7005

Daytime Telephone number

mwolasky@wolasky.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 NAMEThe name of the corporation shall be: DAAA, Inc.**ARTICLE II PRINCIPAL OFFICE**Principal street address
9400 S. Dadeland Blvd. Suite 604
Miami, Florida 33156Mailing address, if different is:

_____**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: All lawful purposes.

_____**ARTICLE IV SHARES**The number of shares of stock is: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Jerry Wolasky, PresidentAddress: 9400 S. Dadeland Blvd. Suite 604
Miami, Florida 33156

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

2020 DEC 28 AM 10:42

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: Marjorie E. Wolasky
Address: 9400 S. Dadeland Blvd Suite 604
Miami, Florida 33156

ARTICLE VII INCORPORATORThe name and address of the incorporator is:

Name: Marjorie E. Wolasky
Address: 9400 S. Dadeland Blvd Suite 604
Miami, Florida 33156

2020 DEC 28 AM 10:42

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

Marjorie E. Wolasky 12/23/20
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.317.155, F.S.

Marjorie E. Wolasky 12/23/20
Required Signature/Incorporator Date