

P21000050805

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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((H21000207711 3)))



H210002077113ARCV

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

From:  
Account Name : DAKOTA ACCOUNTING SERVICES INC.  
Account Number : I20160000034  
Phone : (786)650-1600  
Fax Number : (786)650-1601

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

Email Address: INFO@2020TAXPRO.COM

FLORIDA PROFIT/NON PROFIT CORPORATION

Miami Dice & More! Inc

|                       |         |
|-----------------------|---------|
| Certificate of Status | 1       |
| Certified Copy        | 0       |
| Page Count            | 01      |
| Estimated Charge      | \$78.75 |

Electronic Filing Menu

Corporate Filing Menu

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FILED  
21 MAY 27 AM 10:07  
FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

21 MAY 27 PM 6:07

2021 MAY 27 PM 1:58



May 25, 2021

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

2020 TAX  
13501 SW 128TH ST  
STE 217  
MIAMI, FL 33186US

SUBJECT: MIAMI DICE & MORE!  
REF: W21000075955

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet:

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

If you have any further questions concerning your document, please call (850) 245-6052.

SHAMIYA M HARRIS  
Regulatory Specialist II  
New Filings Section

FAX Aud. #: H21000207711  
Letter Number: 521A00011235

COVER LETTER

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

SUBJECT: Miami Dice & More! 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  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM:

2020 TAX

Name (Printed or typed)

13501 SW 128<sup>th</sup> Street, STE 217

Address

Miami, FL 33186

City, State & Zip

786-650-1600

Daytime Telephone number

info@2020TAXPRO.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: Miami Dice & More! Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

608 NW 58 CT  
Miami FL 33126

Mailing address, if different is:

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: Silvia Batan, President Name and Title: \_\_\_\_\_

Address: 608 NW 58 CT Address: \_\_\_\_\_  
Miami, FL 33126

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

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

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

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

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: 2020 TAX  
Address: 13501 SW 128<sup>th</sup> ST, STE 217  
Miami, FL 33186

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: 2020 TAX  
Address: 13501 SW 128<sup>th</sup> ST, STE 217  
Miami, FL 33186

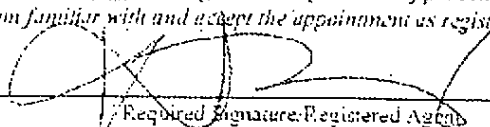
ARTICLE VIII EFFECTIVE DATE:

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.)

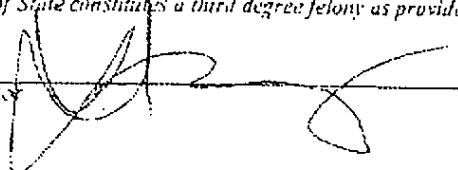
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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

5/24/21  
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

5/24/21  
Date