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To:			
	Division of Corporations		
	Fax Number : (850)617-6381	38	2021 JUL
From:		ΑC	-
	Account Name : THE TAX GROUP INC	드쥬	\subseteq
	Account Number : I20180000051	>=!	
	Phone : (305)223-4648	<u> </u>	N
	Fax Number : (786)361-1360	<i>55</i> ₹	
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		ري درا	AH IO:
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I	FLORIDA PROFIT/NON PROFIT CORPORATION	1	·J
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	D & M Brands Corp		

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ATX1

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D & M BRANDS CORP

ARTICLES OF INCORPORATION

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

				_
ARTICLE II PRIN				•
950 W 6TH AVE A	<u>street</u> address PT 424	Malling address, if different is: 6950 W 6TH AVE APT 424		
IALEAH, FL 33014		HIALEAH,	FL 33014	
ARTICLE III PURI				
	th the corporation is organized is:			
ANY AND ALL LAWF	UL BUSINESS			
	·		·	
			<u> </u>	
			S	202
			P C C C C C C C C C C C C C C C C C C C	ווע ו
	<u> </u>			<u>-</u>
ARTICLE IV SHARES			88	_
he number of shares	s of stock is: 100		S D D D D D D D D D D D D D D D D D D D	AH
RTICLE V INITIA	L OFFICERS AND/OR DIRECTORS		أكعز	<u>.</u>
Name and Title:	JOCHEN A MEJIA VALENCIA. P	Name and Title:	RAIMUNDO DIAZ SOSA. VP	52
Address:	8769 HOLLY CT APT 203	Addrese:	6950 W 6TH AVE APT 424	_
	TAMARAC, FL 33321		HIALEAH, FL 33014	
				
Name and Title:	LORENA DIAZ DIAZ. S	Name and Title:		
Name and Title:	LORENA DIAZ DIAZ. S 6950 W 6TH AVE APT 424			
		Address:		
	6950 W 6TH AVE APT 424	Address:		
	6950 W 6TH AVE APT 424 HIALEAH, FL 33014	Address:		
Address:	6950 W 6TH AVE APT 424	Address: Name and Title:		

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D & M B	RANDS CORP		ATX1
Name a	and Title:	Name and Title:	
Address		Addres	
		,	
ARTICLE VI	REGISTERED AGENT		
	Florida street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	LORENA DIAZ DIAZ		
Address:	6950 W 6TH AVE APT 424		
	HIALEAH, FL 33014	_	s 2:
ARTICLE VII	INCORPORATOR	•)21 . ECR
	address of the Incorporator is:		2021 JUL 21 AM 10: 52 SECRETARY OF STATE TALLAHASSEE, FL
			21 22 23 24
Name:	LORENA DIAZ DIAZ		
Address:	6950 W 6TH AVE APT 424		<u>C. 2. 10. 1</u>
	HIALEAH, FL 33014		52 T.
	EFFECTIVE DATE: other than the date of filing: 7/21/20:	24 (20712)	
(If an effective (date is listed, the date must be specific and can	21 (OPHONAL) not be more than five days prior o	r 90 days after the
filing.)			
Note: If the dat listed as the doc	e Inserted in this block does not meet the applicable ument's effective date on the Department of State's	le statutory filing requirements, this or records.	date will not be
Having been nam in this certificate	ned as registered agent to accept service of proces, I am familiar with and accept the appointment as	s for the above stated corporation a registered agent and agree to act in (t the place designated this capacity
	Require/Signature/Registered Agent		VEOC/16/40
	Require Signature/Registered Agent		Date
I submit this doc	ument and affirm that the facts stated herein are tro	ie. I am aware that the false informat	tion submitted in a
occument to the	Department of State constitutes a third degree felo	ny as provided for in s.817.155, F.S.	
	Required Signature/Incorporator		07/21/2021
	required Signature/Incorporator		Dato