

10/15/21, 12:54 PM

Division of Corporations

P21000090100

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 : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
FAX

2021 OCT 15 AM 9:52

10/15/21

****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

DC Clayton Corp.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

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

RECEIVED IN STATE
2021 OCT 15 AM 9:52**ARTICLE I NAME**

The name of the corporation shall be: DC Clayton Corp.

ARTICLE II PRINCIPAL OFFICEPrincipal street address

10203 Collins Avenue 1104N

Mailing address, if different is:

Bal Harbor, FL 33154

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Interior design, resale of goods, and all lawful purposes

ARTICLE IV SHARES

1,000,000

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Daniel C. Cuevas, President

Name and Title:

Address 10203 Collins Avenue 1104N

Address:

Bal Harbor, FL 33154

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: C T Corporation System
 Address: 1200 South Pine Island Road
 Plantation, FL 33324

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Daniel C. Cuevas
 Address: 10203 Collins Avenue 1104N
 Bal Harbor, FL 33154

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 DEPARTMENT OF STATE
 TALLAHASSEE, FL

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:

By: Nichol McCray Nichol McCray, Asst. Secretary 10/15/2021
 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.

[Signature] 10/14/21
 Required Signature/Incorporator Date