

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : FANJUL ENTERPRISES LLC
Account Number : I20190000080
Phone : (305)603-8791
Fax Number : (877)503-6086

****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
DANISTESEBAMIA CORP**

Certificate of Status	0
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Page Count	01
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TALLAHASSEE, FLORIDA

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Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: DANISTESEBAMIA CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

1690 NE 191 ST APT 1690-390MIAMI, FL 33179**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: _____

ANY AND ALL LAWFUL PURPOSES**ARTICLE IV SHARES**The number of shares of stock is: 1000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: HUMBERTO ENRIQUE ACEVEDO BRACHO-P

Name and Title: _____

Address 1690 NE 191 ST APT 1690-390

Address: _____

MIAMI, FL 33179

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT
MIAMI, FLORIDA

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: HUMBERTO ENRIQUE ACEVEDO BRACHOAddress: 1690 NE 191 ST APT 1690-390MIAMI, FL 33179**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: HUMBERTO ENRIQUE ACEVEDO BRACHOAddress: 1690 NE 191 STMIAMI, FL 33179**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

02/04/2022

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

02/04/2022

Required Signature/Incorporator_____
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JUDICIAL CIRCUIT IN FLORIDA
MIAMI, FLORIDA