

3/18/22, 11:57 AM

Division of Corporations

(((H22000101935 3)))

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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : YOUR DREAM SERVICES CORP.
Account Number : I20200000137
Phone : (786)660-0108
Fax Number : (786)364-1047

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2022 MAR 18 PM 1:30

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****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@yourdreamms.com

**FLORIDA PROFIT/NON PROFIT CORPORATION
BETTHEL COMPANY CORP**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

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COVER LETTER

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

(((H22000101935 3)))

SUBJECT: BETTHEL COMPANY CORP
(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: DANIELA DIAZ
Name (Printed or typed)

2800 WESTON RD STE 201
Address

WESTON FL 33331
City, State & Zip

786-232-2053
Daytime Telephone number

Bethelcompany.corp@gmail.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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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: BETTIEL COMPANY CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

2800 WESTON RD STE 201

WESTON FL 33331

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DANIELA DIAZ-PRESIDENT

Name and Title:

Address 2800 WESTON RD STE 201

Address:

WESTON FL 33331

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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TALLAHASSEE, FLORIDA

(((H22000101935 3)))

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: YOUR DREAM MULTISERVICES CORP

Address: 8300 NW 53RD ST STE 350

MIAMI, FL 33156

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DANIELA DIAZ

Address: 2800 WESTON RD STE 201

WESTON FL 33331

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TALLAHASSEE, FLORIDA

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

Isamar Torres

Required Signature/Registered Agent

03/18/2022

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.

Daniela Diaz

Required Signature/Incorporator

03/18/2022

Date