

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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Division of Corporations  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
DISLON Corporation**

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

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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
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**COVER LETTER**

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

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**SUBJECT:** DISLON Corporation**(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:** Bridgette Alvarez

Name (Printed or typed)

300 South Aragon Avenue, Suite 310

Address

Coral Gables, FL 33134

City, State &amp; Zip

305-668-6449

Daytime Telephone number

dislon.desarrollos@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: DISLON Corporation**ARTICLE II PRINCIPAL OFFICE**Principal street address  
4990 SW 72nd Avenue  
Suite 111  
Miami, FL 33155Mailing address, if different is:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_**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: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Manuel Jose Londono  
Delgado, PresidentAddress: 4990 SW 72nd Avenue  
Suite 111  
Miami, FL 33155Name and Title: Diana Maria Giraldo Londono  
Vice PresidentAddress: 4990 SW 72nd Avenue  
Suite 111  
Miami, FL 33155Name and Title: Manuela Londono Giraldo,  
SecretaryAddress: 4990 SW 72nd Avenue  
Suite 111  
Miami, FL 33155

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

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

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

Address: \_\_\_\_\_  
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STATE  
OF FLORIDA

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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: Miami Legal PA  
 Address: 300 South Aragon Avenue,  
Suite 310  
Coral Gables, FL 33134

**ARTICLE VII INCORPORATOR**The **name and address** of the Incorporator is:

Name: Bridgette Alvarez  
 Address: 300 South Aragon Avenue, Ste 310  
Coral Gables, FL 33134

**ARTICLE VIII EFFECTIVE DATE:**Effective date, if other than the date of filing: April 1, 2022. (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*

/s/Bridgette Alvarez  
 Required Signature/Registered Agent

04.11.2022  
 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.*

/s/Bridgette Alvarez  
 Required Signature/Incorporator

04.11.2022  
 Date

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 CORAL GABLES, FLORIDA

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