Division of Corporations

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(((H23000009990 3)))



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From:

Account Name : LICENSES & PERMITS LLC

Account Number : I20210000155 Phone : (305)226-8727 Fax Number : (305)226-8767

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FLORIDA PROFIT/NON PROFIT CORPORATION **DUGLAS SERVICES GROUP CORP**

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January 10, 2023

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LICENSES & PERMITS LLC

SUBJECT: DUGLAS SERVICES GROUP CORP

REF: W23000002706

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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> 2023 JAH 17 PM 9: 41 SECRETARY OF STATE

COVER LETTER

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

SUBJECT: _	Duglas Sei	vices Gr	006	CORP	
ODDIECT	(PROPOSED CORPORA	TE NAME - MUST INCLI	UDE SUFFIX)	
D					
Enclosed are an or	iginal and one (1) copy of the artic	cles of incorporation and	a check for:	<u>:</u>	
© \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL COF	□ \$87.50 Filing Fectorified & Certific Status PY REQUID	e, Copy cate of	
FROM: LUCIA ESTRElla / Licenses & Permits LIC Name (Printed or typed) 8300 West Flagter St Suite 114					
. · <u>-</u> -	Miami, +L City, Sta	33)44 Ite & Zip	3011E	<u>1</u> 14 -	
(305)226-8707					
Daytime Telephone number Li Censes 4 @ G mail . Com E-mail address: (to be used for future annual report notification)					
N	OTE: Please provide the origin	ial and one copy of the	e articles.	AN 17 PM 9: ETARY OF STA	

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

The name of the con	poration shall be: Duglas	SAVINAS	Grania 1	Coep	,
ARTICLE II PR	INCIPAL OFFICE	00, 1,003	CHOUP !	VER	
	Principal street address		Mailing address, if diff	Terentis:	
3534 NI	N 13 Street	252	4 NW 135	H100+	—
Miamu F	1 33125		mi, Fl 3:		
The purpose for which	POSE		•		
The purpose for with	th the corporation is organized is:				
					_
ARTICLE IV SHA. The number of shares of	RES 1				
	A decour 15.				
ARTICLE Y INITI	AL OFFICERS AND/OR DIRECTORS	. DOF	SIDENT		
Name and Tit	ie: Duglas Membreno vai	CAEC			
Address	3534 NW 13 Stree	+ Address:			
	MIAMI, PR 33125				_
		<u> </u>			_
				_	_
Name and Title	:	Name and Title:			
Address					-
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Name and Title;	v	Name and Title:	r S		CTOPES CTOPES
Address		-	i	; - -	() ()
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				9113	

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Addre	288	Address:	
ARTICLE VI The name and I	REGISTERED AGENT Florida street address (P.O. Box NOT a	occentable) of the registered and	La to.
Name:		<u>ceno</u> Volde 7	
Address:	3534 NW 13	_	
	Miami, #1 3		
ARTICLE VII	<u>INCORPORATOR</u>		
The name and ad	ddress of the Incorporator is:		
Name:	Duglas Mem	nbreno valde	22
Address:	3534 NW 13	street	
	Miami, FL 33	3195	
Elicchive date, if o	EFFECTIVE DATE: Other than the date of filing: ate is listed, the date must be specific a	9 23 (OPTI	IONAL) days prior or 90 days after the
Note: If the date in the document's effi	inserted in this block does not meet the a fective date on the Department of State's	applicable statutory filing requi	rements, this date will not be listed as
Having been names	d as registered agent to accept service of puttiar with and accept the appointment a		rporation at the place designated in this act in this capacity
	Required Signature/Registered Ag		1/9/23
I submit this docum document to the Dep	nent and affirm that the facts stated her partment of State constitutes a third degr		Date the false information submitted in a 17.155, P.S.
Required Signature/			1/9/23
,		•	Date
			2023 SEC TA
			100 J
			SO - The