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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 : ALEX PINA CO.
Account Number : 120190000095
Phone : (305)803-8471
Fax Number : (305)602-3977

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SECRETARY OF STATE
TALLAHASSEE, FL

FILED

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: client@alexpinaco

FLORIDA PROFIT/NON PROFIT CORPORATION

Duni VA Mobile Services Corp

Certificate of Status	0
Certified Copy	0
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DIVISION OF CORPORATIONS
TALLAHASSEE, FL

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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: **DUNI VA MOBILE SERVICES CORP****ARTICLE II PRINCIPAL OFFICE**Principal street address
5035 SW 111th Ave

Mailing address, if different is:

Miami, FL 33165**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: **Any And All Lawful Purpose.****ARTICLE IV SHARES**The number of shares of stock is: **10,000****ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: **DUNIESKY RAMIREZ AMARO - PRESIDENT**

Name and Title: _____

Address **5035 SW 111th Ave**

Address: _____

Miami, FL 33165

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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 2023 JUN 21 PM 3:10
 CLERK OF CIRCUIT COURT
 MIAMI-DADE COUNTY, FL

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: ALEX PINA CO.
Address: 8400 NW 36TH ST STE 450
DORAL, FL 33166

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DUNIESKY RAMIREZ AMARO
Address: 5035 SW 111th Ave
Miami, FL 33165

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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

 06/21/2023
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 §817.155, F.S.

 06/21/2023
Required Signature/Incorporator Date