

Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
ENIDYLAN INC**

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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T.JH
2/22/24

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: ENIDYLAN INC

ARTICLE II PRINCIPAL OFFICE

Principal street address	Mailing address, if different is:
4715 NW 7TH ST APT 308	SAME
MIAMI, FL 33126	

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	ENIELYS GARCIA ORTIZ - P	Name and Title:	
Address	4715 NW 7TH ST APT 308	Address:	
	MIAMI, FL 33126		
Name and Title:		Name and Title:	
Address		Address:	
Name and Title:		Name and Title:	
Address		Address:	

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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: ENIELYS GARCIA ORTIZ
 Address: 4715 NW 7TH ST APT 308
MIAMI, FL 33126

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: ENIELYS GARCIA ORTIZ
 Address: 4715 NW 7TH ST APT 308
MIAMI, FL 33126

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



Enielys Garcia Ortiz (Feb 21, 2024 13:45 EST)

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.



Enielys Garcia Ortiz (Feb 21, 2024 13:45 EST)

Required Signature/Incorporator

Date

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 TALLAHASSEE, FLORIDA