Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000150936 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

Account Name : RASI

Account Number : I20220000023 Phone : (800)221-2972 Fax Number : (917)243-5843

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

Email Address:_

FLORIDA PROFIT/NON PROFIT CORPORATION **Deet Consulting Corp**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	S70.00

ARTICLES OF INCORPORATION

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

ARTICLE 1 NAME The name of the corporat	on shall be:	ma ner sa mandrone a ni ne nasans			
ARTICLE II PRINC	I <u>PAL OFFICE</u> Principal <u>street</u> address	•	Mailing address, if	different is:	
15901 Collins Ave Apt 1507			15901 Collins Ave Apt 1507		
Sunny Isles, FL 33160		Sunn	y Isles, FL 33160	a P Tide до двиговор да на применения до да до	
ARTICLE III PURPO The purpose for which th			••	٠.	
emin on annu anthropi de la partir per en					
			•	2024	
• ,	ES 200 stock is: L OFFICERS AND/OR DIRECTORS	Marian, marian		APR 26 AM 11: CREIMARY OF STA	
	Deana Telmany, President	Name and 1	Title:	11:13 11:13 11:13	
Address	15901 Collins Ave Apt 1507	Address:		· ·	
	Sunny Isles, FL 33160	•			
Name and Title:		Nante and	·		
Address		Address:	~*************************************		
Name and Title:		Name and	Title:		
Address		Address:			

Name a	nd Title;	Name and Title:
Addres	S	Address:
ADTICLE VI	PENINTERED ANEART	
	REGISTERED AGENT Clorida street address (P.O. Box NOT acceptable) o	of the registered agent is:
Name:	Deana Telmany	_
Address:	15901 Collins Ave Apt 1507	
	Sunny Isles, FL 33160	
		
ARTICLE YII	INCORPORATOR	
The name and a	iddress of the Incorporator is:	
Name ⁻	Deana Telmany	_
Address:	15901 Collins Ave Apt 1507	_
	Sunny Isles, FL 33160	_
	EFFECTIVE DATE: fother than the date of filing:	(OPTIONAL)
(If an effective filing.)	date is listed, the date must be specific and conn	ot be more than five days prior or 90 days after the
	e inserted in this block does not meet the applicable effective date on the Department of State's records	e statutory filing requirements, this date will not be listed as
		ss for the above stated corporation at the place designated in egistered agent and agree to act in this capacity
	1) Leiny	4/25/24
	Required Signature/Registered Agent	Date
		e true. I am aware that the fulse information submitted in a
aocument to the	Department of State constitutes a third degree feld	ny as provided for in s.817.155, F.S.
Rea	uired Signature/Incorporator	Date