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.

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Division of Corporations Fax Number : (850)617-6381  Fom:  Account Name : CG TAX, INC. Account Number : I1999000017 Phone : (305)485-9300 Fax Number : (305)485-1098		NOT hit the REFRESH/RELOAD button on your browser from this page. Do generate another cover sheet.	<u></u>	<u> </u>
Account Name : CG TAX, INC.  Account Number : 119990000017  Phone : (305)485-9300  Fax Number : (305)485-1098	ſο:			) II: 00
e ,	**E	Account Number: I19990000017 Phone : (305)485-9300 Fax Number : (305)485-1098  Inter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**	122	2024 DEC 30 PM 2:

This Corporation will start operating On January 1st 2025.

Electronic Filing Menu

Estimated Charge

Corporate Filing Menu

Help

\$78.75

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# ARTICLES OF INCORPORATION

QF.

## DULCE ORION, INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above name corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporate, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

#### ARTICLE I

The name of this corporation shall be:

## DULCE ORION, INC.

## ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

#### ARTICLE III

The general nature of the business and objects and purposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

(1) Said corporation shall further have powers: To have perpetual succession by it's corporate

## DULCE ORION, INC.

#### ARTICLE IV

The aggregate number of shares, which the corporation shall have authority to issue, is the total sum of 50 shares, having an individual par value of \$10.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation

#### ARTICLE V

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

ORLANDO BLANCO 6895 W 12<sup>TH</sup> AVE HIALEAH, FL 33014

The principal office shall be:

6895 W 12<sup>TH</sup> AVE HIALEAH, FL 33014

## ARTICLE VI

The initial Board of Directors shall consist of a total of ONE (01) person, and the name and address of the person who is to serve as initial director:

ORLANDO BLANCO 6895 W 12<sup>TH</sup> AVE HIALEAH, FL 33014

**PRESIDENT** 

egasaye.

The name and address of the incorporator executing these Articles of Incorporation is

ORLANDO BLANCO 6895 W 12<sup>TH</sup> AVE HIALEAH, FL 33014

IN WITNESS WHERE OF, the undersigned incorporator has (ve) executed these Articles of Incorporation this DECEMBER 30, 2024.

ORLANDO BŁĄNCO

**ARTICLE VII** 

THIS CORPORATION WILL START OPERATING ON JANUARY 1<sup>ST</sup>, 2025

# CERTIFICATE OF DESIGNATION REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provision of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, Submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The Name of the corporation is:

DULCE ORION, INC.

2. The Name and Address of the registered agent and office is:

ORLANDO BLANCO 6895 W 12<sup>TH</sup> AVE HIALEAH, FL 33014

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES. AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

**SIGNATURE** 

Date: DECEMBER 30, 2024