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# TRANSMITTAL LETTER

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

SUBJECT: ART LIFE DECORATION, INC.  (Proposed corporate name – must include suffix)						
Enclosed is an o ☐ \$70.00 Filing Fee	original and one (1) copy of the  \$78.75  Filing Fee  & Certificate of Status	articles of incorporation    X	and a check for:  \$87.50  Filing Fee,  Certified Copy & Certificate of Status			

# ADDITIONAL COPY REQUIRED

FROM:	RAMON REYES	
	Name (Printed or typed)	
	_5035 PALM AVE.	
<del>-</del>	Address	
	HIALEAH, FL. 33012	
	City, State & Zip	··
	(305) 822-0669	
	Daytime Telaphone number	

NOTE: Please provide the original and one copy of the articles

### ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose	of forming a corporation	n under the Florida Busines	s Corporation Act,
hereby adopts the following Articles of Incorp			•

ARTICLE I NAME

The name of the corporation shall be:

# ART LIFE DECORATION, INC.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1801 S.W. 119th AVE. MIRAMAR, FL 33025

## ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

#### 10,000 COMMON SHARES

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

ANA M. RIOS 1801 S.W. 119th AVE. MIRAMAR, FL 33025

#### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

PRESIDENT/ SECRETARY ANA M. RIOS

1801 S.W. 119<sup>th</sup> AVE. MIRAMAR, FL 33025

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(An additional article must be added if an effective date is requested.)

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.

Gea cyflan Pr. Signature/Registered Agent

07/12/04

Date