

P11000011986

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

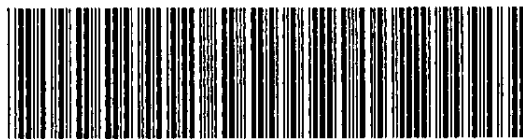
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRS
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COVER LETTER

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

SUBJECT: BEYOND CREATIVE, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: JOSE A. IRIBARREN
Name (Printed or typed)

5424 S.W. 186TH WAY
Address

MIRAMAR, FL 33029
City, State & Zip

305-970-0404
Daytime Telephone number

JOSE@GOBEYONDCREATIVE.COM
E-mail address: (to be used for future annual report notification)

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

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: **BEYOND CREATIVE, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
5424 S.W. 186TH WAY
MIRAMAR, FL 33029

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
TO PROVIDE GRAPHIC DESIGN & MARKETING SERVICES TO BUSINESSES AND CONSUMERS ALIKE.

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **JOSE IRIBARREN - DIRECTOR**
Address: **5424 S.W. 186TH WAY**
MIRAMAR, FL 33029

Name and Title: _____
Address: _____

Name and Title: **SANDRA IRIBARREN - DIRECTOR**
Address: **5424 S.W. 186TH WAY**
MIRAMAR, FL 33029

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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TALLAHASSEE FLORIDA

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: **JOSE IRIBARREN**
Address: **5424 S.W. 186TH WAY**
MIRAMAR, FL 33029

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **JOSE IRIBARREN**
Address: **5424 S.W. 186TH WAY**
MIRAMAR, FL 33029

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



Required Signature/Registered Agent

01/31/2011
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.



Required Signature/Incorporator

01/31/2011
Date