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Florida Department of State
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Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : BLANCO ACCOUNTING I, INC.
Account Number : I20100000060
Phone : (305)828-1148
Fax Number : (305)828-1709

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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
NICOLE SANTIAGO ENTERPRISES,INC.

Certificate of Status	0
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Monday, November 18, 2013

To Whom It May Concern:

I, Zeodila Milian, President NICOLE SANTIAGO ENTERPRISES, INC.have no intention of reinstating the mentioned corporation therefore; I release the name for to another entity.

Should you need additional information, please do not hesitate to inform me.

Zeodila Milian

Sworn to and subscribed before me this 11/18/2013

Notary at Large

LUIS R. BLANCO
MY COMMISSION # EE 010360
EXPIRES: July 20, 2014
Bonded Thru Notary Public Underwriters

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: NICOLE SANTIAGO ENTERPRISES, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

2631 WEST 70 PLACE
HIALEAH FL 33016

Mailing address, if different is:

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

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TALLAHASSEE, FLORIDA

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ZEODILA MILIAN PRESIDENT
Address: 2631 WEST 70 PLACE
HIALEAH FL 33016

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

(conti.)

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: ZEODILA MILIAN

Address: 2631 WEST 70 PLACE

HIALEAH FL 33016

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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: ZEODILA MILIAN

Address: 2631 WEST 70 PLACE

HIALEAH FL 33016

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

_____ 11/18/2013

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.

_____ 11/18/2013

Required Signature/Incorporator Date