

P/6 000077518

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

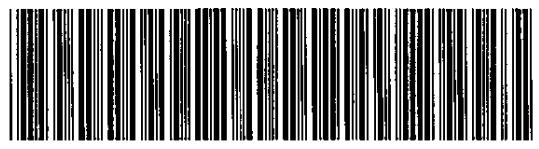
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
16 SEP 21 AM 11:09

[Handwritten signature] 09/22/16

COVER LETTER

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

Queens Worldwide, Inc.

SUBJECT: _____

(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

\$78.75 Filing Fee & Certified Copy
 \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: Michelle Barrera

Name (Printed or typed)

1020 SW 46 Ave Apt #107

Address

Pompano Beach, Florida 33069

City, State & Zip

347-990-6316

Daytime Telephone number

Michelle.barrera.r@gmail.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

Queens Worldwide, Inc.

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1020 SW 46 Ave _____

Apt # 107 _____

Pompano Beach, Florida 33069 _____

ARTICLE III PURPOSE

Stock market and real estate investments.

The purpose for which the corporation is organized is: _____

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ARTICLE IV SHARES

1,000

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michelle Barrera, President _____ Name and Title: _____

Address 1020 SW 46 Ave _____ Address: _____

Apt # 107 _____

Pompano Beach, Florida 33069 _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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: Michelle Barrera
 Address: 1020 SW 46 Ave Apt # 107
 Pompano Beach, Florida 33069

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ARTICLE VII INCORPORATOR

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

Name: Michelle Barrera
 Address: 1020 SW 46 Ave Apt # 107
 Pompano Beach, Florida 33069

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

[Handwritten Signature]

Required Signature/Registered Agent

09/17/2016

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.

[Handwritten Signature]

Required Signature/Incorporator

09/17/2016

Date