

04/26/2033 05:54

21 P. 1/003

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

(((H15000145498 3)))

EFFECTIVE DATE



H150001454983ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

****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
FLASH MOMENT STUDIO INC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

JUN 1 5 2015

Corporate Filing Menu **S. GILBERT**

Help

15 JUN 15 PM 12:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 JUN 15 PM 4:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

RECEIVED

EFFECTIVE DATE

6-12-15

H15000145498

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: FLASH MOMENT STUDIO INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

1420 SW 88TH AVE

PEMBROKE PINES

FLORIDA 33025

Mailing address, if different is:

1420 SW 88TH AVE

PEMBROKE PINES

FLORIDA 33025

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: PHOTOGRAPHY

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES @ 1.00 PER VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: PRES JEAN C. STAUDIGL DIEGO

Name and Title:

Address: 1420 SW 88TH AVE

Address:

PEMBROKE PINES

FLORIDA 33025

Name and Title: V.P JULIO SALVADOR OLIVO

Name and Title:

Address: 1297 MAJESTIC TER

Address:

WESTON

FLORIDA 33327

Name and Title:

Name and Title:

Address:

Address:

FILED
15 JUN 15 PM 12:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H15000145498

H15000145498

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____
	_____		_____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: JEAN CARLOS STAUDIGL DIEGO

Address: 1420 SW 88 TH AVE

PEMBROKE PINES FL 33025

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: JEAN CARLOS STAUDIGL DIEGO

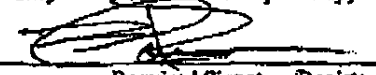
Address: 1420 SW 88TH AVE

PEMBROKE PINES FL 33025

ARTICLE VIII EFFECTIVE DATE:Effective date, if other than the date of filing: JUNE 12, 2015 (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*

X  06/12/2015

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.817.153, F.S.

X  06/12/2015

Required Signature/Incorporator Date

H15000145498