

No 6000011887

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

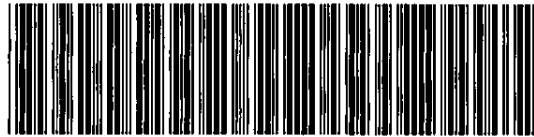
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100081377381

11/15/06--01007--006 **78.75

RECEIVED

06 NOV 15 AM 10:22

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

06 NOV 15 PM 2:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C-8. 11-15

EXPRESS CORPORATE FILING SERVICE INC.

Requestor's Name

1000 PONCE DE LEON BLVD. SUITE:101

Address

CORAL GABLES, FL 33134 (305) 444-4994

City/State/Zip

Phone #

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. LATIN CREATIONS INC
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☒ Pick up time _____ ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input checked="" type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

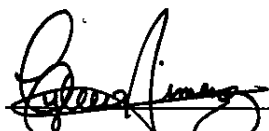
OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

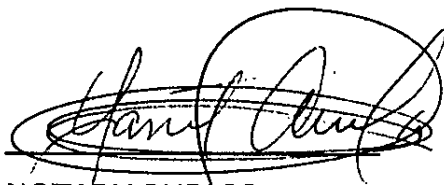
Examiner's Initials

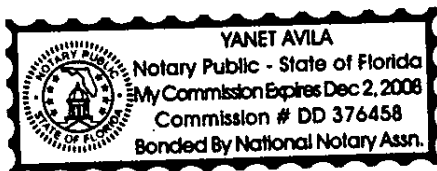
AFFIDAVIT

I EYLEEN JIMENEZ FORMER DIRECTOR OF LATIN CREATIONS
INC DOC.#P06000100256 HEREBY RELEASE THE CORPORATE NAME
TO MYSELF FOR THE PURPOSE OF FORMING A NEW CORPORATION. I
ALSO STATE THAT I HAVE NO INTENTIONS OF REINSTATING THE
DISSOLVED CORPORATION.


EYLEEN JIMENEZ

STATE OF FLORIDA
COUNTY OF DADE


NOTARY PUBLIC
YANET AVILA CC931055



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TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

LATIN CREATIONS INC

ARTICLE II PRINCIPAL OFFICE

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

4611 SW 143RD PLACE EAST
MIAMI FL 33175

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

WE DEDICATE OURSELVES TO SPONSOR KIDS FOR DIFFERENT COMPETITIONS & EVENTS.
WE PROVIDE OUTFITS, PHOTO SECTIONS PAY FOR CLASSES & COMPETITION FEES. HELP
THEM AND LEAD THEM TOWARDS THE WAY THEIR TALENT MIGHT TAKE THEM.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

BY MINUTES AND BYLAWS

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

JARVIS VIZA - PD
EYLEEN JIMENEZ - VP
4611 SW 143RD PLACE EAST
MIAMI FL 33175

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

EYLEEN JIMENEZ
4611 SW 143RD PLACE EAST
MIAMI FL 33175

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

EYLEEN JIMENEZ
4611 SW 143RD PLACE EAST
MIAMI FL 33175

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.



Signature/Registered Agent

11-14-2006

Date



Signature/Incorporator

11-14-2006

Date

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TALLAHASSEE, FLORIDA