

N 120000008805

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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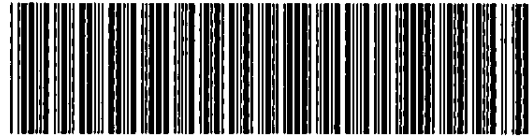
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/4

COVER LETTER

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

SUBJECT: TREASURESREEN, 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

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

FROM: Sylvia WENGROW
Name (Printed or typed)

11635 S. Budd DRIVE
Address

Cooper City Florida 33026
City, State & Zip

954 559-7831
Daytime Telephone number

TREASURESREEN@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 TREASURES SCREEN INC.

The name of the corporation shall be:

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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

11635 S. Budd Drive
Cooper City FL 33026

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SALES OF BOOKS, TOYS, PHONES AND General
MERCHANDISE.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SYLVIA WENGROW PRES
Address: 11635 S. Budd Drive
Cooper City
FLORIDA 33026

Name and Title: _____
Address: _____

Name and Title: STACY Goldberg Secy
Address: 10146 SW 53RD ST
Cooper City
FLORIDA 33328

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: STACY Goldberg
Address: 10146 SW 53RD ST
Cooper City, FL 33328
(33328)

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: SYLVIA WENGROW
Address: 11635 S. Budd Drive
Cooper City FL 33026

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

* Stacy Goldberg
Required Signature/Registered Agent

9-8-12
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.

Sylvia Wengrow
Required Signature/Incorporator

9-8-12
Date