N15000007730

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	-
PICK-UP WAIT M	۹IL
(Business Entity Name)	
, ,	
(Document Number)	
,	
Certified Copies Certificates of Status _	
CONTINUE COPIES	
Special Instructions to Filing Officer:	
N. Q.	

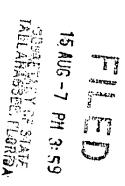
Office Use Only

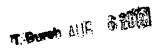


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COVER LETTER

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

SUBJECT: Special Magic	In Living Everyday Inc.		
	(PROPOSED CORP	ORATE NAME – <u>MUST IN</u>	CLUDE SUFFIX)
		,	
Cooleand is an anished an	d (1)	٠: - ا	lands fam.
Enclosed is an original and	d one (1) copy of the Ar	ticles of Incorporation and	a check for
\$70.00	\$78.75	□\$78.75	\$87.50
Filing Fee	Filing Fee &	Filing Fee	Filing Fee,
	Certificate of Status	& Certified Copy	Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
FROM:	amie Steinberg		
_	Na	me (Printed or typed)	-
1	2006 NW 20th Street		

E-mail address: (to be used for future annual report notification)

Plantation, FL 33323

(954) - 614 - 0565

Jamie50198@aol.com

NOTE: Please provide the original and one copy of the articles.

Address

City, State & Zip

Daytime Telephone number



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 20, 2015

JAMIE STEINBERG 12006 NW 20TH STREET PLANTATION, FL 33323

SUBJECT: SMILE INC.

Ref. Number: W15000048504

We have received your document for SMILE INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch Regulatory Specialist II

Letter Number: 015A00015131

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

ARTICLE I The name of the	NAME Special Magic In Lie corporation shall be:	ving Everyday Inc.		
ARTICLE II	PRINCIPAL OFFICE			
12006	Principal street address: NW 20th Street Plantation, FL 33323		Mailing address, if different is:	
				·
	PURPOSE r which the corporation is organized is: South Florida together in hopes of raising			efforts to bring the
			Ties.	ហ៊
			Design	5 11
				A CONTRACTOR OF THE CONTRACTOR
			10 Text (10	呈 [1] 32 pmg
ARTICLE IV ARTICLE V	MANNER OF ELECTION The manner elected and appointed by Initial Officers AND/OR DIRECT	the CEO		
Name and Title	Jamie Steinberg, CEO	Name and Title Address:	Keren Ibgui, COO	
Address	12006 NW 20th Street Plantation, FL		9532 NW 8th Circle Plantation, FL	_
	33323		33324	-
Name and Title	: ::	Name and Title		_
Address		Address:		-
Name and Title	:	Name and Title		
Address				_
		_		_

Name and Title:	!	Name and Title:	-	
Address		Address.	_	
-		·		
Name and Title:	I	Name and Title:	_	
Address		Address:		
ARTICLE VI	REGISTERED AGENT	•		
	Iorida street address (P.O. Box NOT acceptation	able) of the registered agent is:	टा	
Name:	Larry Steinberg			
Address:	8201 Peters Road Plantation,	FL	1 Section	
Address.	33324		3	
ARTICLE VII The name and a Name: Address:	INCORPORATOR Iddress of the Incorporator is: Jamie Steinberg 12006 NW 20th Street Plantation 33323	, FL	3: ₹	
ARTICLE VIII Effective date, is (If an effective after the filing.)		. (OPTIONAL) cannot be more than five business days prior or 90	business days	
	e inserted in this block does not meet the apple etive date on the Department of State's record	licable statutory filing requirements, this date will not b	be listed as the	
_		f process for the above stated corporation at the place registered agent and agree to act in this capacity	e designated in this	
Required Signature of Registered Agent		08/04/20	08/04/2015	
-	Required Signature of Registered A	Agent Date		
	*	n are true. I am aware that any false information subm	itted in a document	
	Jami Kuing Required Signature of Incorp	08/04/20 Orator Date		

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