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

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SUBJECT:	(PROPOSED CORPORA)	TE NAME - MUST INCL	UDE SUFFIX)	es e
Enclosed is an origin	al and one(1) copy of the article	s of incorporation and a c	check for:	_
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:	Yolanda K Name (P 4150 Bergam	rinted or typed) onf (f. Address	-	
	<u>Kissimmee</u> City,	State & Zip Solution State & Zip Felephone number	1746	OO SEP II PM 4: SECRETALLY OF STAT
John BY P JTHORIZATION BY P CORRECT Ala LA DATE SYAM ADB	HONE TO NOTE: Please provide the o	riginal and one copy o	f the articles.	ORIDA DO

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:	FILED		
Nagrin's Corporation	SECRETARY OF STATE TALLAHASSEE, FLORIDA		
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 4/50 Bergamont G. (Liss H. 34746			
The purpose for which the corporation is organized is: Wedding and Party Condinators	e e e e e e e e e e e e e e e e e e e		
ARTICLE IV SHARES The number of shares of stock is: ///			
ARTICLE V INITIAL OFFICERS/DIRECTORS (options) The name(s) and address(es):	<u>ay</u>		
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Uplanda Rivera 4150 Bergamont of Ciss 71. 34746	TT 2 1 TOTAL		
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Volencia Pivera 4150 Bergament Cf Liss 71. 34746	********		
Having been named as registered agent to accept service of process for the above certificate, I am familiar with and accept the appointment as registered agent and	ve stated corporation at the place designated in this agree to act in this capacity		
Signature/Registered Agenty	Date / /		
Signature/Incorporator	9/6/00 Date		