

TRANSMITTAL LETTER

P020000014782

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

SUBJECT: ARTESANIA EUROPEA, 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: MARGARITA NOEMI ABUE  
Name (Printed or typed)

16919 N. Bay Rd. Suite #2-916  
Address

Sunny Isles Beach, FL 33160-4253  
City, State & Zip

(305) 948-8723  
Daytime Telephone number

000004863890--2  
-02/04/02--01047--016  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

FILED  
02 FEB -4 PM 2:08  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

02-08-02

# 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:

Artesania Europea, Inc.

## ARTICLE II      PRINCIPAL OFFICE

The principal place of business/mailing address is:

P.O.Box 546212  
Surfside, FL 33154-6212

## ARTICLE III      PURPOSE

The purpose for which the corporation is organized is:

To assemble and administer Art workshops for profit, including but not limited to Art classes, the selling of Art goods, supplies, text books, tools, and any other related merchandise.

## ARTICLE IV      SHARES

The number of shares of stock is:

100 (one hundred)

## ARTICLE V      INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s)

Margarita Noemi Abue  
16919 N. Bay Rd. Suite 2-916  
Sunny Isles Beach, FL 33160-4253  
Director/Incorporator

## ARTICLE VI      REGISTERED AGENT

The name and Florida street address of the registered agent is:

Margarita Noemi Abue  
16919 N. Bay Rd. Suite 2-916  
Sunny Isles Beach, FL 33160-4253

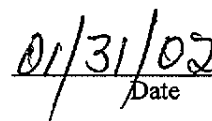
## ARTICLE VII      INCORPORATOR

The name and address of the Incorporator is:

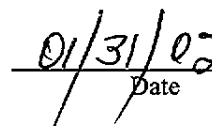
Margarita Noemi Abue  
16919 N. Bay Rd. Suite 2-916  
Sunny Isles Beach, FL 33160-4253

.....  
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

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

  
\_\_\_\_\_  
Date

FILED  
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SECRETARY OF STATE  
TALLAHASSEE FLORIDA