## FILEU

## D03000015485

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Do	cument Number)	<del></del>		
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			

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02/04/03--01021--003 \*\*78.75

SECRETARSEE, FLORID

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## TRANSMITTAL LETTER

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

SUBJECT:	NCEMB is	10		
	(PROPOSED CORPORAT	'E NAME - <u>MUST INCLU</u>	DE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	a check for:	
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	S \$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:	Nick A	ADDITIONAL COL	PY REQUIRED	
6208 CAN St.				
Hollywood, Fl. 33024.				
954-854-3589 Davime Telephone number				

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

40112 mosa, +1, 22081			
ARTICLE III PURPOSE			
The purpose for which the corporation is orga	mized is:		
Clothing Manufacturing	9 21000		
Cist M. A. Landing	4 incollance	-	
	, ,		
ARTICLE IV SHARES			
The number of shares of stock is:			
100			
•	meanono (	71	
ARTICLE V INITIAL OFFICERS/DI	<u>IKECTUKS (optional</u>		
The name(s), address(es) and title(s):			
ARTICLE VI REGISTERED AGE		**	
The name and Florida street address of the	registered agent is:		
Nick Cruz			•
6208 CAIL 34			
Hollywood, Fl.33024			
ARTICLE VII INCORPORATOR			
The name and address of the Incorporator is:	, , , , , , , , , , , , , , , , , , ,	m, v.	<b></b>
Nick CRUS			
6203 call st	<u>.</u>		
Hollywood, Fl. 33024			
**************		*********	
Having been named as registered agent to accept servi certificate, I am familiar with and accept the appointm			ce designated in this
Certuscale, 1 am tallinai with and accept the appointme	eni as registereu agent anu ag	гее 10 аст пт инь сарасну ///	
11/4 ()		1/21/12	
Signature/Registered Agent		1/.30///3 Date	
olghathethegistered Agent		/ Date	•
Tr		/ /	
		1/38/03	
Signature/Incorporator		Date	•-
	· **		
7			

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03 FEB -3 AMII: 23

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is:

ARTICLE I NAME

The name of the corporation shall be:  $NC \stackrel{!}{\leftarrow} MP \quad iNC$ .

PO BOX 8/6/12

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)