

PD3000021229

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Marta GAVE

AUTHORIZATION BY PHONE TO

CORRECT Art. 1

DATE 2/21

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02/21/03--01025--004 \*\*\$7.50

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

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

SUBJECT: Machon Enterprises Inc. (dba. Your Store)  
(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: Marta Carolina Machon  
Name (Printed or typed)

1401 S. Le Jeune Rd. Apt 4  
Address

Miami, FL 33134  
City, State & Zip

305-772-4597  
Daytime Telephone number

**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**

The name of the corporation shall be:  
Machon Enterprises, Inc.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:  
1401 S. Le Jeune Rd Apt 4  
Miami, FL 33134

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Selling, Shoes and more

### **ARTICLE IV SHARES**

The number of shares of stock is:  
100

### **ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

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

### **ARTICLE VI REGISTERED AGENT**

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

Marta Carolina Machon  
1401 S. Le Jeune Rd. Apt 4  
Miami, FL 33134

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Marta Carolina Machon  
1401 S. Le Jeune Rd. Apt 4  
Miami, FL 33134

\*\*\*\*\*

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

Marta B Machon  
Signature/Registered Agent

2-17-03  
Date

Marta B Machon  
Signature/Incorporator

2-17-03  
Date

FILED  
03 FEB 20 AM 2:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA