

(Requestor's Name)

(Address)

{Address}

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

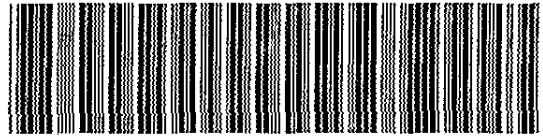
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300012704013

02/24/03--01047--019 **78.75

U
K
L
M

03 MAR -7 PM 1:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CB 3-1-3

Transmittal Letter

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

SUBJECT: _____

Shi Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing fee
& Certified Copy

☐ \$131.25
Filing fee,
Certified Copy,
& Certificate

Additional Copy Required

FROM: _____

Ingrid Jean-Joseph + Andersen Rabel
Name (printed or typed)

11430 NE 12 AVE
Address

Miami, FL 33161
City, State & Zip

800-819-3902 Ext: 42299
Daytime Telephone Number

Note: Please provide the original and *one copy* of the articles.



FLORIDA DEPARTMENT OF STATE

Ken Detzner
Secretary of State

February 25, 2003

INGRID J. JOSEPH
11430 NE 12 AVE
MIAMI, FL 33161

SUBJECT: SHI INC.
Ref. Number: W03000005469

We have received your document for SHI INC. and your check(s) totaling \$78.75. 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.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of 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) 245-6925.

Cynthia Blalock
Document Specialist
New Filing Section

Letter Number: 203A00012163

Articles of Incorporation

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation shall be:

7th Shi Inc.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

11430 NE 12 AVE
Miami, FL 33161

ARTICLE III: SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1,000.

ARTICLE IV: INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Ingrid Jean-Joseph
11430 NE 12 AVE
Miami, FL 33161

ARTICLE V: INCORPORATOR(S)

See instructions for officers/directors.

The name(s) and street addresses of the incorporator(s) to these Articles of Incorporation is (are):

Ingrid Jean-Joseph & Andersen Rabel
11430 NE 12 AVE
Miami, FL 33161

03 MAR -7 PM 1:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

X

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this
29 day of May 2002.

(An additional article must be added if an effective date is requested.)

Signature 

Signature _____

Signature _____

Notarization is not required.

Note: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

Filing Fee \$70.00



**Certificate of Designation of
Registered Agent/Registered Office**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

7th Shi Inc.

2. The name and address of the registered agent and office is:

Ingrid Jean-Joseph
(Name)
11430 NE 12 AVE
(P.O. Box or Mail Drop Box NOT Acceptable)
Miami, FL 33161
(City/State/Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

[Signature]
(Signature)

5/29/02
(Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 MAR -7 PM 1:13

FILED