

P03000041073

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

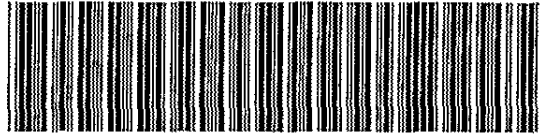
(Business Entity Name)

(Document Number)

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

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03 APR -7 PM 3:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4-11-03  
DS

Allison Cohen  
7510 SW 53 Court  
Miami, FL 33143  
Telephone: (305) 668-4140

April 1, 2003

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

**VIA OVERNIGHT MAIL**

**RE: The Paper Bug Co.**

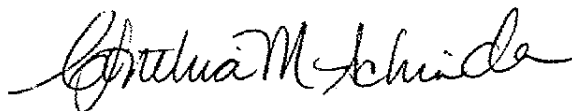
Dear Sir or Madam:

Enclosed are the following:

- Transmittal Letter;
- Articles of Incorporation for The Paper Bug Co. (original and one copy);
- \$70 filing fee; and
- A self-addressed, stamped envelope. Please provide me with a stamped copy of this letter to acknowledge receipt of the enclosed documents.

Please do not hesitate to give me a call should you have any questions or comments.

Very truly yours,



Cynthia M. Schindle  
Secretary for Allison Cohen

/cms  
Enclosures

**ARTICLES OF INCORPORATION**

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

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**ARTICLE I NAME**

The name of the corporation shall be:

The Paper Bug Co.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

7510 S.W. 53 Ct.  
Miami, Florida 33143

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**ARTICLE IV SHARES**

The number of shares of stock is: 100 at \$1- per share.

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

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

Allison Cohen, President  
7510 SW 53 Ct.  
Miami, FL 33143

**ARTICLE VI REGISTERED AGENT**

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

Allison Cohen  
7510 SW 53 Ct.  
Miami, FL 33143

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Allison Cohen  
7510 SW 53 Ct.  
Miami, FL 33143

\*\*\*\*\*  
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

Allison Cohen

Signature/Registered Agent

4/1/03

Date

Allison Cohen

Signature/Incorporator

4/1/03

Date