

P030000 42247

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

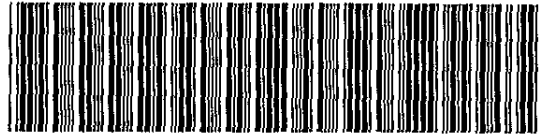
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
03 APR 10 AM 11:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SMITH APR 15 2003

TRANSMITTAL LETTER

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

SUBJECT: Smile Mon 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Patience Accounting and Tax Service, Inc.
Name (Printed or typed)

P.O. Box 420503
Address

Summerland Key, FL 33042-0503
City, State & Zip

(305) 745-1841
Daytime Telephone number

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

ARTICLES OF INCORPORATION

OF

Smile Mon Inc.

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:

Smile Mon Inc.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business shall be:

120 Duval Street
(Physical street address)

Key West, FL 33040
(City, State, and Zip Code)

The mailing address of the Corporation shall be:

120 Duval Street
(Street or P.O. Box)

Key West, FL 33040
(City, State, and Zip Code)

ARTICLE III - CAPITAL STOCK

The authorized capital stock of the Corporation shall be 5,000 shares of common stock with a par value of \$1.00 per share. The Corporation plans to initially issue 500 shares, reserving the balance for subsequent issuance.

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TALLAHASSEE, FLORIDA

ARTICLE IV - INITIAL REGISTERED AGENT AND ADDRESS

The following person shall serve as registered agent for the Corporation at the address stated. I hereby am familiar with and accept the duties and responsibilities as Registered Agent.



Signature

1437 12th St.
(Street Address)

Yakov Blives
Print or Type Name

Key West, FL 33040
(City, State, and Zip Code)

ARTICLE V - INCORPORATOR(S)

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

IN WITNESS WHEREOF, this is to certify that the undersigned incorporator, who shall also serve as initial director and registered agent, hereby makes, subscribes, acknowledges and files these Articles of Incorporation, in order to form a corporation under the laws of the State of Florida, and hereby accepts designation as registered agent.

INITIAL ADDRESS of Corporation and Incorporator

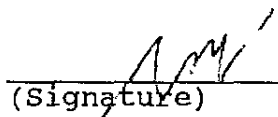


(Signature)

1437 12th St.
(Street Address)

Yakov Blives
(Typed name)

Key West, FL 33040
(City, State, & Zip Code)



(Signature)

1437 12th St.
(Street Address)

Igan Magal
(Typed name)

Key West, FL 33040
(City, State, & Zip Code)

STATE OF FLORIDA

COUNTY OF MONROE

The foregoing instrument was acknowledged before me on this
7th day of April, 2003 by Yakov Blives
and Idan Magal of Smile Mon Inc.
a Florida Corporation, on behalf of
the corporation. He/She are personally known to me and did
not take an oath.

Marilyn Sommerhoff
NOTARY PUBLIC, STATE OF FLORIDA

Marilyn Sommerhoff
(TYPED OR PRINTED NAME)



Marilyn Sommerhoff
MY COMMISSION # DD167160 EXPIRES
November 21, 2006
BONDED THRU TROY FAIR INSURANCE, INC.

03 APR 10 AM 11:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED