

P03000066183

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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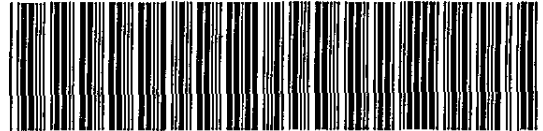
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 JUN 12 AM 10:36

TRANSMITTAL LETTER

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

SUBJECT: _____

FAUX ILLUSIONS, INC.

(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: _____

JEROME S. REISMAN, LAW OFFICE

Name (Printed or typed)

3006 AVIATION AVE. Suite 4-B

Address

COCONUT GROVE, FLORIDA 33133

City, State & Zip

305-856-1856

Daytime Telephone number

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

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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:

Faux Illusions, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*3060 NW 30 Street
Miami, Florida 33142*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Painting, decorating

ARTICLE IV SHARES

The number of shares of stock is:

5,000 \$1.00 par value

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

*Director, President, Secretary, Treasurer
Alejandro Pascual*

ARTICLE VI REGISTERED AGENT

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

*Mercedes A. Ortega
3006 Aviation Avenue, Suite 4-B
Coconut Grove, Florida 33133*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Mercedes A. Ortega
3006 Aviation Avenue, Suite 4-B
Coconut Grove, Florida 33133*

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

Mercedes A. Ortega

Signature/Registered Agent

5/11/03

Date

Mercedes A. Ortega

Signature/Incorporator

5/11/03

Date