## P0300087047

•
(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:
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## TRANSMITTAL LETTER

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

SUBJECT: Olg's Comer	The. ENAME-MUST INCLU	DE SHEELX)		
Enclosed are an original and one (1) copy of the artic				
□ \$70.00 ≥ \$78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status		
FROM: Olga Pajon Name (Printed or typed)  9043 NUT 143rd Terrace Address				
Busy exercition Idialed (305) 820	FU 33018 State & Zip - 5579 Elephone number			

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



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 2, 2003

OLGA PAJON 9043 NW 163 TER MIAMI LAKES, FL 33018

SUBJECT: OLGA'S CORNER, INC.

Ref. Number: W03000018841

We have received your document for OLGA'S CORNER, 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):

Unable to contact you directly by telephone.

The document must state the number of shares of authorized stock.

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) 245-6933.

Dale White Document Specialist New Filings Section

Letter Number: 203A00039740

ARTICLE I NAME  The name of the corporation shall be:	03 AUG -8 AM 11: 40
	SECRETARY OF STATE FALLAHASSEE FLORIDA
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  9043 N.W. 163 Cd Terrace	
Miani Jakes, FL 33018  ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	. –
To start my own business	 
ARTICLE IV SHARES The number of shares of stock is:	·
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s):  N / A	· · · · · · · · · · · · · · · · · · ·
ARTICLE VI REGISTERED AGENT  The name and Florida street address of the registered agent is:	
9043 NO 163 TEXTACE  MIANI Jakes, FL 33018	Section 2015 Annual Control of Co
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:	
0109 1901) 9043 NW 163 es Terrace HIGHI Jakes, PC 32018.	************
Having been named as registered agent to accept service of process for the above stated corp certificate, I am familiar with and accept the appointment as registered agent and agree to act	oration at the place designated in this
Signature/Registered Agent	5\5\03
Signature/Incorporator	<u>5\5\03</u> Date

FILED

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