

FD400013306

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PICK-UP

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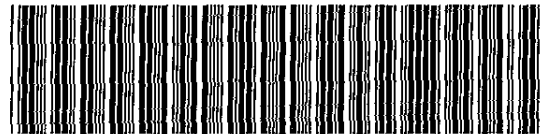
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/12/04--01031--007 **78.75

RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
04 JAN 12 PM 1:17

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04 JAN 16 AM 8:44

Name
Shen
~~1004-1491~~

1/22

OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. DECORATIVE DESIGN'S CORP.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

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04 JAN 16 AM 10:35
DIVISION OF CORPORATION

January 15, 2004

LAZARUS

SUBJECT: DAVID'S DESIGNS CORP.
Ref. Number: W04000001791

We have received your document for DAVID'S DESIGNS CORP.. However, the document has not been filed and is being returned for the following:

You failed to make the correction(s) requested in our previous letter.

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) 245-6934.

Loria Poole
Document Specialist
New Filings Section

Letter Number: 304A00002571

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:

DAVID'S DESIGNS Corp.

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04 JAN 16 AM 8:44

ARTICLE II - PRINCIPAL OFFICE

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

6840 S.W. 35ST
MIAMI FL 33155
Miguel O. Barrientos

ARTICLE III - SHARES

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

100

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Miguel O. Barrientos
6840 S.W. 35ST
MIAMI FL 33155

ARTICLE V - INCORPORATOR

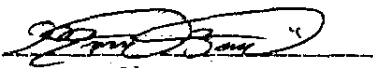
The name and street address of the incorporator to these Articles of Incorporation is:

Miguel O. Barrientos

6840 S.W. 35th

Miami FL 33155

The undersigned incorporator has executed these Articles of Incorporation this _____ day of _____ 20____



Signature

ARTICLE VI- DIRECTOR(S)

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

Miguel O. Barrientos President

6840 S.W. 35th

Miami FL 33155

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.



Registered Agent Signature

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