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(Requestor's Name)

(Address)

(Address)

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TRANSMITTAL LETTER

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

SUBJECT: Pixels & Portraits 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: _____
Joseph E. Loyack
Name (Printed or typed)

_____ 3301 Trentwood Blvd.
Address

_____ Orlando, Florida 32812
City, State & Zip

_____ 407-855-6235
Daytime Telephone number

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

ARTICLES OF INCORPORATION

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

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SECRETARY
TALLAHASSEE

ARTICLE I NAME

The name of the corporation shall be:

Pixels & Portraits Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4409 Hoffner Ave. Suite 104
Orlando, Florida 32812

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Photography Business

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Joseph E. Loyack
3301 Trentwood Blvd.
Orlando, Florida 32812

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Joseph E. Loyack
3301 Trentwood Blvd.
Orlando, Florida 32812


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



Signature/Registered Agent

9/8/04

Date



Signature/Incorporator

9/8/04

Date