P0400013/6/8

(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:				
Mr. Perez GAVE				
AUTHORIZATION BY PHONE TO CORRECT <u>articles</u> DATE <u>9/21/04</u>				
DOS EXAM 10 White				

Office Use Only



D. WHITE SEP 2 1 2004



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09/09/04--01063--003 **87.50

SECRETARY OF STATE
ALLAMASSEE, FLORIDA

T L T L

TRANSMITTAL LETTER

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

SUBJECT: CRECHIVE WOCKLORKS OF SOUTH Florida, COKPO (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
	(1.101.0022.0011.011				
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 ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM: Me litza DEREZ Name (Printed or typed)					
10775 SW 1905treet Bay 33 Address MIGHI, Florida 33157 City, State & Zip 786 663.7446 Fax 786.573.4944					
Daytime Telephone number					

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 10, 2004

MELITZA PEREZ 10775 SW 190 ST BAY 33 MIAMI, FL 33157

SUBJECT: CREATIVE WOODWORKS OF SOUTH FLORIDA, CORP.,

Ref. Number: W04000033916

We have received your document for CREATIVE WOODWORKS OF SOUTH FLORIDA, CORP., and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

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: 304A00054182

9.20

Division of Compositions D.O. BOY 6297 Well-bases Florida 2021

ARTICLES OF INCORPORATION	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED
ARTICLE I NAME	
The name of the corporation shall be: CRECHIVE WOODWICKS	am Secon AF9029de, conp
	SECRETARY OF STATE
	TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is: 10775 >W	90St Bay 33
MiaMi. Flo	orida 33157
	337
ARTICLE III PURPOSE	
	n Cabinets
•	
ARTICLE IV SHARES	. The second of
The number of shares of stock is:	_
	•
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
List name(s), address(es) and specific title(s): We litzy PERE	
1643 SW 1	190st. Bry 33
MIGMI, FLOR	ida 33157
) (TOP	
ARTICLE VI REGISTERED AGENT	
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the	
Melitza Peñ ez 16775 SW 190St.	for 22
Mami of locida 3)5/5 <i>+</i>
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	7
MUNIZA PERCE	1. Pau 33
Melitzh Pere 10775 Sw 1905 Mani, Florida	33157L
Propriet 100	, , , , , , , , , , , , , , , , , , , ,
***********	********
Having been named as registered agent to accept service of process for the above stacertificate, I am familiar with and accept the appointment as registered agent and agree	ted corporation at the place designated in thi ee to act in this capacity
Martine Parl	9.8.04
Signature/Registered Agent	Date
Mil De Deas	9.8.04
Signature/Incorporator	Date
orphatme, moorborator	