

POS0000042463

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

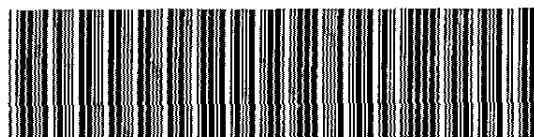
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900047921329

03/18/05--01001--020 **236.25

RECEIVED
05 MAR 18 AM 10:11
DATE
FILING OFFICE
DIVISION OF CORPORATIONS

FILED
05 MAR 18 PM 2:45
SECRETARY OF STATE
DIVISION OF CORPORATIONS

EXPRESS CORPORATE FILING SERVICE INC.

Requestor's Name

1000 PONCE DE LEON BLVD. SUITE:101

Address

CORAL GABLES, FL 33134 (305) 444-4994

City/State/Zip

Phone #

OFFICE USE ONLY

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

1. MY BIG PARTY & FLOWER CREATION, CORP.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☐ Walk in

☒ Pick up time _____

☒ 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

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:

MY BIG PARTY & FLOWER CREATION, CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

12064 SW 125TH ST
MIAMI FL 33186

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100
MARIA NIFRI FS 50% FI FNA NIFRI FS 50%

ARTICLE V INTIAL OFFICERS AND/OR DIRECTORS

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

MARIA NIEBLES (PD)	ELENA NIEBLES (VP)
12064 SW 125TH ST	12064 SW 125TH ST
MIAMI FL 33186	MIAMI FL 33186

ARTICLE VI REGISTERED AGENT

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

ELENA NIEBLES
12064 SW 125TH ST
MIAMI FL 33186

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARIA NIEBLES	ELENA NIEBLES
12064 SW 125TH ST	12064 SW 125TH ST
MIAMI FL 33186	MIAMI FL 33186


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

MARCH 17, 2005

Date



Signature/Incorporator

MARCH 17, 2005

Date

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05 MAR 18 PM 2:45