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# LAZARUS CORPORATE FILING SERVICE

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MIAMI, FL 33165 (305) 552-5973 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if kr.own): (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time 2.06 Certified Copy Mail out ☐ Will wait Photocopy Certificate of Status **NEW FILINGS** <u>AMENDMENTS</u> Profit Amendment Resignation of R.A., Officer/Director Not for Profit Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other \ Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other

**Examiner's Initials** 

### ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(\$\mathbb{G}\) the following Articles of Incorporation.

### ARTICLE I - NAME

The name of the corporation shall be:

Mayra's Art & Spa Inc.

### ARTICLE II - PRINCIPAL OFFICE

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

7126 SW 117 a.W. Unit B15 Miami, Fl. 33183.

### ARTICLE III -SHARES

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

100

# ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Mayra Artze Mata 11371 SW 74 St. Miami, Fl. 33173

### <u>ARTICLE V - INCORPORATOR</u>

### **ARTICLE VI- DIRECTOR(S)**

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

Mayra Artze Mata - President 7216 SW 117 ave. Unit B15 Miami, Fl. 33183

# **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