

905000132386

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

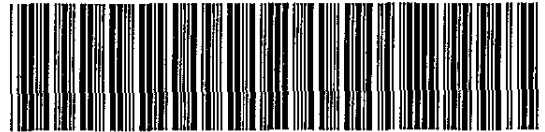
(Business Entity Name)

(Document Number)

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09/02/05--01013--001 **70.00

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TALLAHASSEE, FLORIDA

9/28/05
9/17/05
9/17/05

TRANSMITTAL LETTER

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

SUBJECT: M & A INVESTMENTS INC DBA IMAGE ENHANCERS
(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
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: MICHAEL R ALONZI
Name (Printed or typed)

713 NW 94TH TER
Address

GAINESVILLE FL 32607
City, State & Zip

352-332-6021
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 7, 2005

MICHAEL R ALONZI
713 NW 94TH TER
GAINESVILLE, FL 32607

SUBJECT: MA INVESTMENT INC DBA IMAGE ENHANCERS
Ref. Number: W05000041434

We have received your document for MA INVESTMENT INC DBA IMAGE ENHANCERS and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing the enclosed application and submitting the appropriate fees to this office.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6955.

Suzanne Hawkes
Document Specialist
New Filings Section

Letter Number: 005A00055500

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

The name of the corporation shall be:

MAG Jewelry ^{AND} _{symbol} ↓ Investment -

The principal place of business/ mailing address is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To sell Jewelry on the internet

The number of shares of stock is:

160

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

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

MICHAEL ROBERT ALONZI

713 NW 94TH TER GAINESVILLE FL 32607

The name and address of the Incorporator is:

MICHAEL ROBERT ALONZI

713 NW 94TH TER GAINESVILLE FL 32607

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

9-20-05
Date

Signature/Incorporator

8/22/05
Date

MICHAEL R ALONZI

FILED
05 SEP 2 PM 2:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA