

P05000140414

(Requestor's Name)

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PICK-UP

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MAIL

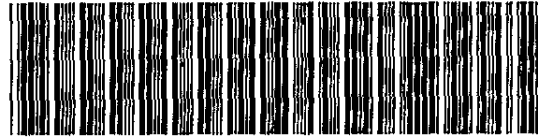
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10/17/05  
BWK

**COVER LETTER**

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

SUBJECT: MIAMI Scrappin, INK.  
(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: JOANE TORRES  
Name (Printed or typed)

370 Mirada AVE, Suite 4  
Address

CORAL Gables, FL 33134  
City, State & Zip

(786) 252-0617  
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)

**ARTICLE I NAME**

The name of the corporation shall be:

Miami Scrappin, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

370 Minorca Ave., Suite 4  
CORAL GABLES, FL 33134

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Sell scrapbook supplies,  
provide lessons on scrapbooking.

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

JOANE TORRES  
PRESIDENT  
370 MINORCA AVE. SUITE 4  
CORAL GABLES, FL 33134

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TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

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


J.P. GONZALEZ-SIRGO, P.A.  
370 MINORCA AVE., Suite 4  
CORAL GABLES, FL 33134

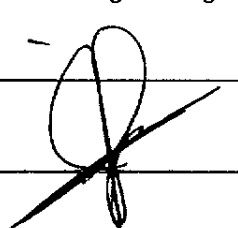
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

JOANE TORRES  
Minorca AVE., Suite 4  
CORAL GABLES, FL 331

\*\*\*\*\*  
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

  
\_\_\_\_\_  
Signature/Incorporator

10/10/05  
\_\_\_\_\_  
Date

10/10/05  
\_\_\_\_\_  
Date