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COVER LETTER

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

_{SUBJECT:} EYE C	ANDY TALENT INC.		
	(PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an origina	al and one (1) copy of the artic	eles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: MAF	RTIKA GUERRERO		
	Name (Printed or typed)	
<u>73</u>	34 NORTHEAST 90TH S		
	A	ddress	
<u>M</u>	IAMI, FLORIDA 33138	D	
	City,	State & Zip	
30	5-975-6059		
	Daytime Te	elephone number	

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