P06000046175

(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:

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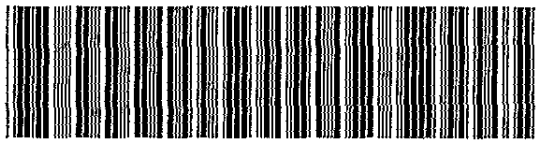

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FILED
06 MAR 29 PM 3:45
SECRETARY OF STATE
TALLAHASSEE FLORIDA

VH

COVER LETTER

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

SUBJECT: MI CUKI ENTERPRISES, INC.
(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: MICHEL CUKIERMAN
Name (Printed or typed)

167 N.E. 45 STREET
Address

MIAMI, FL, 33137
City, State & Zip

(305) 572-9262
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)

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TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

MICUKI ENTERPRISES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

167 N.E. 45 STREET, MIAMI, FLA, 33137

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THERAPEUTIC SERVICES

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):

- MICHEL A. CUKIERMAN 167 N.E. 45 ST MIAMI, 331
(PRESIDENT)
- SEVERINE CUKIERMAN 167 N.E. 45 ST MIAMI, 33137
(SECRETARY)

ARTICLE VI REGISTERED AGENT

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

MICHEL CUKIERMAN
167 N.E. 45 STREET. MIAMI, 33137

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

MICHEL CUKIERMAN
167 N.E. 45 STREET. MIAMI, 33137

****

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 — Date

Signature/Incorporator — Date