

PO6000090238

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(City/State/Zip/Phone #)

☐ PICK-UP

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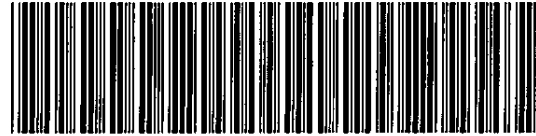
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/08/06--01012--001 **78.75

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06 JUL -7 AM 9:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

pa

COVER LETTER

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

SUBJECT: Creative Management Operations 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: Christina Lauren Marques
Name (Printed or typed)

5717 La Belle Street
Address

Orlando, FL 32809
City, State & Zip

407-697-9581
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 12, 2006

CHRISTINA LAUREN MARGUES
1111 LAKE LEGRO CT.
ORLANDO, FL 32835

SUBJECT: CREATIVE MANAGEMENT OPERATIONS
Ref. Number: W06000026707

We have received your document for CREATIVE MANAGEMENT OPERATIONS and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return 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 850-245-6062.

Paisley A Alford
New Filing Section
Division of Corporations

Letter Number: 906A00039908

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

the name of the corporation shall be:

Creative Management Operations INC.

ARTICLE II PRINCIPAL OFFICE

the principal place of business/mailling address is:

7345 W. SAND LAKE Rd, SUITE 405
Orlando, FL 32819

ARTICLE III PURPOSE

the purpose for which the corporation is organized is:

OFFICE ADMINISTRATION SERVICES

ARTICLE IV SHARES

the number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Christy L. Marques - President
1111 Lake Legro Ct.
Orlando, FL 32835

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Christy L. Marques -
1111 Lake Legro Ct
Orlando, FL 32835

Christy L. Marques

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Christy L. Marques

1111 Lake Legro Ct. Orlando, FL 32835

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

Christy L. Marques
Signature/Registered Agent

May 27 2006
Date

Christy L. Marques
Signature/Incorporator

May 27 2006
Date

FILED
06 JUL -7 AM 9:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA