P1700002224

(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:				

Office Use Only



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MRA



1:207-3096

COVER LETTER

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

SUBJECT: ARTISTIC SYSTEMS INC				
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)				
Enclosed are an original and	d one (1) copy of the article	s of incorporation and	a check for:	
	78.75 ng Fee	\$78.75 Filing Fee	\$87.50 Filing Fee,	
	ertificate of Status	& Certified Copy	Certified Copy & Certificate of Status	
		ADDITIONAL COL		
	L.		<u></u>	
FROM: JOSE A. MICO, PRESIDENT				
1101111		inted or typed)		
PO BOX 28537				
Address				
HIALE	EAH, FL 33002			
City, State & Zip				
(305)	333-3692			
Daytime Telephone number				

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



January 19, 2007

JOSE A MICO PO BOX 28537 HIALEAH, FL 33002

SUBJECT: ARTISTIC SYSTEMS INC

Ref. Number: W0700003096

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

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

The person designated as incorporator in the document and the person signing as incorporator must be the same.

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) 245-6879.

Ruby Dunlap Regulatory Specialist New Filing Section

Letter Number: 407A00004525

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:

ARTISTIC SYSTEMS INC

FILED

07 FEB 19 AM 9: 19

SECRE FARY UF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

751 WEST 35 ST HIALEAH, FL 33012

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

NEW CORPORATION

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):

ROSE M. MICO, PRESIDENT 751 WEST 35 ST HIALEAH, FL 33012

ARTICLE VI REGISTERED AGENT

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

ROSE M. MICO, PRESIDENT 751 WEST 35 ST HIALEAH, FL 33012

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ROSE M. MICO, PRESIDENT 751 WEST 35 ST HIALEAH, FL 33012

****************	*************
Having been named as registered agent to accept service of process for certificate, I am familiar with and accept the appointment as registered	
Palple	01/12/07
Signature/Registered Agent	Date
Bal Man	01/12/07

Signature/Incorporator

Date

this