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(Requestor's Name)

(Address)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers MAR 08 2007

W07-8470

COVER LETTER

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

SUBJECT: CREATIONS ENTERPRISES, CO.

(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: Noelio Gonzalez
Name (Printed or typed)

12450 Greco Dr.
Address

Orlando, FL 32824
City, State & Zip

(321)948-4871
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

Creations International, Co

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

12450 Greco Dr.
Orlando, FL 32824

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This Corporation may engage in or transact any or all lawful activities of business permitted under the laws of United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE IV SHARES

The number of shares of stock is:

One Thousand Shares of Common Stock per Value \$1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Noelio Gonzalez
12450 Greco Dr.
Orlando, FL 32824
Director-President

ARTICLE VI REGISTERED AGENT

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

Noelio Gonzalez
12450 Greco Dr.
Orlando, FL 32824

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Noelio Gonzalez
12450 Greco Dr.
Orlando, FL 32824

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

Date

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA