

PO8000091993

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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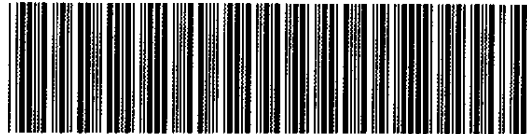
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
MASSACHUSETTS

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COVER LETTER

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

SUBJECT: _____

KISSIFACE 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: _____

TASHERIA MALETTE

Name (Printed or typed)

640 SE 5TH COURT

Address

POMPANO BEACH FL 33060

City, State & Zip

954-729-8623

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)

ARTICLE I NAME

The name of the corporation shall be:

KISSIFACE INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

640 SE 5TH COURT
POMPANO BEACH FL 33060

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY LEGAL ENTITY (BUSINESS)

ARTICLE IV SHARES

The number of shares of stock is:

250 SHARES of STOCKS.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

TASHERA MALETTE
640 SE 5TH COURT
POMPANO BEACH FL 33060

ARTICLE VI REGISTERED AGENT

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

TASHERA MALETTE
640 SE 5TH COURT
POMPANO BEACH FL 33060

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

TASHERA MALETTE
640 SE 5TH COURT
POMPANO BEACH FL 33060

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

TASHERA MALETTE

Signature/Registered Agent

TASHERA MALETTE

Signature/Incorporator

10/05/08
Date

10/05/08
Date

FILED
08 OCT -8 AM 4:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA