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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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11/05/08--01015--004 \*\*70.00





## TRANSMITTAL LETTER

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

SUBJECT:	I & R Home Business Solutions, Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	l a check for:
<b>☑</b> \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED
FROM:	Isabel M Name	. Molina (Printed or typed)	·
	18825 SW 7 St. Address		
	Pembroke Pines, FL 33029 City, State & Zip		
	(954)433-3253  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:

I & R Home Business Solutions, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

18825 SW 7 St. Pembroke Pines, FL 33029

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Direct retail sales of consumer products through home based entrepreneurs.

## 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):

President

Isabel Mercedes Molina

18827 SW 7 St.

Pembroke Pines, FL 33029

Vice-President

Rita Maria Barron

17944 SW 10 Ct.

Pembroke Pines, FL 33029

### ARTICLE VI REGISTERED AGENT

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

Rita Maria Barron 17944 SW 10 Ct.

Pembroke Pines, FL 33029

#### ARTICLE VII INCORPORATOR

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

Isabel Mercedes Molina

18827 SW 7 St.

Pembroke Pines, FL 33029

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

1- 10

Date

Signature/Incorporator

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