

PO 9000032041

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

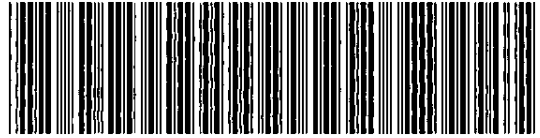
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/07/09--01027--018 **87.50

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09 APR - 7 AM 7:36

SECRETARY OF STATE
TALLAHASSEE, FL 32399

DK

COVER LETTER

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

SUBJECT: MiCreations 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: Michelle Pena

Name (Printed or typed)

15650 SW 148 Court

Address

Miami, FL 33187

City, State & Zip

305-323-6492

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:

MiCreations Inc.

ARTICLE II PRINCIPAL OFFICE

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

15650 SW 148 Court Miami, FL 33187

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ALL LEGAL PURPOSE

ARTICLE IV SHARES

The number of shares of stock is:

100 At \$1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Michelle Pena

15650 SW 148 Court, Miami, FL 33187

President

ARTICLE VI REGISTERED AGENT

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

Michelle Pena

15650 SW 148 Court

Miami, FL 33187

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michelle Pena

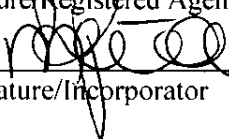
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

03/31/09

Date



Signature/Incorporator

03/31/09

Date

FILED

09 APR - 7 AM 7:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA