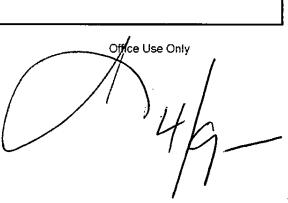
# P10000030763

(Re	questor's Name)		
(Add	dress)		
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(City	y/State/Zip/Phone	e #)	
PICK-UP	WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			





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ECRETARY OF STATE

# **COVER LETTER**

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

SUBJECT: 289 Pas	stry Chef Consultants, Inc.		
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	l 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 CO	PY REQUIRED
FROM: Nic		e (Printed or typed)	
266	White Marsh Circle		
		Address	· ·
Orla	ando, FL 32824	_	
	City.	, State & Zip	
321-	-231-8927		
*	Daytime 1	Telephone number	
dran	nirez24@cfl.rr.com		
<del></del>	E-mail address: (to be use	d for future annual report i	notification)

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:

289 Pastry Chef Consultants, Inc.

# ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is: 266 White Marsh Circle

Orlando, FL 32824

# ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

- To provide professional guidance and products for pastry chefs

Date

# ARTICLE IV SHARES

The number of shares of stock is: 500 shares of \$1.00 per share

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Nicole Ramirez.

President.

266 White Marsh Cir.

Orlando, FL 32824

# ARTICLE VI REGISTERED AGENT

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

Nicole Ramirez, 266 White Marsh Circle, Orlando, FL 32824

# ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

H&S, Inc. Christoph K Warnke, P.O.-Box 450326, Kissimmee, F.

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

3/28/2010 Signature/R Date 3/28/2010

Christoph K Warnke.

