P10000009331

(Requestor's Name)				
(Address)				
(Address)				
(City	//State/Zip/Phone	; #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Doc	cument Number)			
Certified Copies		of Chatus		
Certified Copies	Certificates	or Status		
Special Instructions to Filing Officer:				
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Office Use Only

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COVER LETTER

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

SUBJECT:Funsies	, Inc. (PROPOSED CORPOR.	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	a check for:
\$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 PPY REQUIRED
FROM: <u>Lia</u>		ne (Printed or typed)	

Address

North Miami Beach, FL 33160

City, State & Zip

786.546.9518

Daytime Telephone number

topazliat@gmail.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

red 0.1	<u>NAME</u>		
The name of the Funsies, Inc.	e corporation shall be:		
ARTICLE II	PRINCIPAL OFFICE		<u> </u>
	treet address and mailing address, if diff	erent is:	20 13SEC
3849 NE 170th	St North Miami Beach, FL 33160		SECHETAR ISION OF C
ARTICLE II	I PURPOSE		
• •	or which the corporation is organized is	::	10 30 5
Any and all law	ful business		EU OF STATE ORPORATIONS
ARTICLE IV	SHARES		97
	shares of stock is:		
100 Common S	hares at \$1 Par Value		
ARTICLE V		DIRECTORS	
List name(s), a	address(es) and specific title(s): 3849 NE 170th Asi Topaz -	3849 NE 170th Keren Topaz -	3849 NE 170th
	St North Miami Director	St North Miami Director	St North Miami
Director	Beach, FL 33160	Beach, FL 33160	Beach, FL 33160
	,		
	•		
Director ARTICLE VI	•	'acceptable) of the registered agent is:	
Director ARTICLE VI	REGISTERED AGENT	'acceptable) of the registered agent is:	

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

Liat Topaz

3849 NE 170th St North Miami Beach FL 33160

*******************	************
Having been named as registered agent to accept service of place designated in this certificate, I am familiar with and a	
agree to act in this capacity	
List and	8/00/10
Signature/Registered Agent	Date
tiel and	210010
Signature/Incorporator	Date