

P110000092083461

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
melendrez dance studios inc

Certificate of Status	0
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MRS 1/12/11

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

H11000009208

ARTICLE I NAME

The name of the corporation shall be: MELENDREZ DANCE STUDIOS INC

ARTICLE II PRINCIPAL OFFICE

Principal street address
c/o TAX HELP INC.
1730 S. FEDERAL HWY. #260
DELRAY BEACH, FL 33483

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
DANCE INSTRUCTION

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: P. JONATHON H. TROST
Address: 7909 VENTURE CENTER WAY
#9205
DELRAY BEACH, FL 33437

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: W. J. TREMBLAY, EA.
Address: c/o TAX HELP, INC.
1730 S. FEDERAL HWY. #260
BOYNTON BEACH, FL 33437

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JONATHON H. TROST
Address: 7909 VENTURE CENTER WAY, #9205
BOYNTON BEACH, FL 33437

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

W. J. Tremblay

Required Signature/Registered Agent

1/11/2011

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

[Signature]

Required Signature/Incorporator

1/11/2011

Date

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