## 711000010590

(Requestor's Name)			
(1-1,			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



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2011 JAN 31 AN 10: 14

J. SHIVERS FEB 0 1 2011

## **COVER LETTER**

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

SUBJECT: HIdden Treasures Gold (PROPOSED CORPORAT	Parties, Toc.
Enclosed are an original and one (1) copy of the artic  \$70.00 \$78.75  Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy Certificate of Status  ADDITIONAL COPY REQUIRED
FROM: Nicole Black · Name ·	(Printed or typed)
P.O. Box 570086	ddress 201
Miami, FL 33257	State & Zip
786-402-7674  Daytime Te	lephone number
nikki@perfectimages.biz	

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 Hidden Treasures	Gold Parties, ThC.	
The name of the	corporation shall be:	•	
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address	Mailing add	ress, if different is:
			<u> </u>
	18931 Sterling Dr Cutler Bay, Fl 33157	Miami, FL 33257	7
ARTICLE III	DITOBACE		
	which the corporation is organized is:		
	scrap metal.		
ARTICLE IV	SHARES		
The number of si	hares of stock is: 2000		
ADTICLE II	INITIAL OFFICERS AND/OR DIRE	CTOPS	
	Title: Nicole Black, President		ack Vice-President
Address:	P.O. Box 570086		
	Miami, FL 33257		L 33257
Name and	Title:	Name and Title:	
Address:		Address:	
Name and	Title:	Name and Title:	
Address:		Address:	
			<u> </u>
ARTICLE VI	REGISTERED AGENT		£1% 29
The name and I	Florida street address (P.O. Box NOT accept	table) of the registered agent is:	AR T
Name:	Michaele Meadows, Inc.		AHAN TI
Address:	5 El Monte Lane		SS
	Key West, FI 33040		
ARTICLE VII	INCORPORATOR		<b>R</b> III
	address of the Incorporator is:		
Name:	Michaele Meadows		2 9 L
Address:	5 El Monte Lane	<del> </del>	
	Key West, Fl 33040	<del>-</del>	
Having been na	amed as registered agent to accept service of	f process for the above stated corpor	ation at the place designated in
	am familiar with and accept the appointmen		
,		-	1/2= /
$\rightarrow$	$\gamma \gamma $		1125111
	Required Signature/Registered Ag	ent	Date /
I submit this do	ocument and affirm that the facts stated her	rein are true. I am aware that the fo	atse information submitted in a
aocument to the	Daparfment of State constitutes a third degr	ee jeiony as proviaea jor in s.81/.155	, r.s. / 1
	X Y V VA TO I AP		1/2/11
	// A MICH // //		12011
/	Required Signature/Incorporate	л	Lydic