

P/11000012337

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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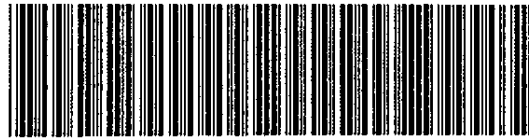
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE FLORIDA

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2/4

## COVER LETTER

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

SUBJECT: White Flour Cake Artistry 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: Larissa N. Sierra  
Name (Printed or typed)

15664 N.W. 81st Court.  
Address

Miami Lakes, FL 33016  
City, State & Zip

(305) 308-6451  
Daytime Telephone number

WhiteFlourCakes@Gmail.com  
E-mail address: (to be used for future annual report 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: White Flour Cake Artistry Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
15664 N.W. 81<sup>ST</sup> COURT.  
MIAMI LAKES, FL. 33016

Mailing address, if different is:

same

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To open a small cake and  
pastry business.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Larissa N. Sierra  
Address: (President)  
15664 N.W. 81<sup>ST</sup> COURT  
MIAMI LAKES, FL. 33016

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: Wilfred Diaz  
Address: (Vice President)  
same 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: Larissa N. Sierra  
Address: 15664 N.W. 81<sup>ST</sup> COURT  
MIAMI LAKES, FL. 33016

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Larissa N. Sierra  
Address: 15664 N.W. 81<sup>ST</sup> COURT  
MIAMI, FL. 33016

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

Larissa Sierra  
Required Signature/Registered Agent

1/28/2011  
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.

Larissa Sierra  
Required Signature/Incorporator

1/28/2011  
Date

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TALLAHASSEE FLORIDA