P/10000/3739

	•	
•	equestor's Name)	
. (Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	⇒ #)
PICK-UP	☐ WAIT	MAIL
(Ви	usiness Entity Nan	ne)
(Do	ocument Number)	_
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	·

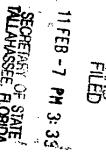
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314/ISION OF CORPORATIONS







COVER LETTER

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

SUBJECT: Mamilla Enterprises, In	C.	
(PROPOSED CORPORA	ΓΕ NAME – <u>MUST INCLUDE SUFFIX</u>)	
Enclosed are an original and one (1) copy of the artic	eles of incorporation and a check for:	
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED	
	ADDITIONAL COPY REQUIRED	
FROM: Josef Silny		
Name	(Printed or typed)	
7101 SW 102 Avenue		
r	rudi 055	
Miami, FL 33173	State & Zip	
305-793-4921 Daytime To	elephone number	
jsilny1948@yahoo.com E-mail address: (to be used	I for future annual report notification)	

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

ARTICLES OF INCORPORATION

APPLIANT	
FILED	

•	In compliance with Chapter 607 an	d/or Chapter 621, F.S. (Profit)	AND
ARTICLE I	VAME Manailla Catanania - Lu	_	FILED 5
The name of the corp	<u>vAME</u> Mamilla Enterprises, In poration shall be:	C.	FEB -7 PM 3: 35
		71	TEB -7 PM 3: 35
ARTICLE II F	PRINCIPAL OFFICE		
71	Principal <u>street</u> address 01 SW 102 Avenue	Mailing ad	AHACCE STATE
	ami, FL 33173		LAHASSEE. FLORIDA
17113	attil, 1 E 35 [7.5		
		11 1/11/11	"
The manage for whi	ch the corporation is organized is:		,
To conduct a v	variety of businesses such as publis	shina custom iswelny n	notography etc
TO CONDUCT A V	dilety of businesses such as public	ining, custom jeweny, pi	iolography, etc.
450000000000000000000000000000000000000	7774 BBG		
ARTICLE IV S The number of shares			
The number of shares	S OT STOCK IS.TOO		
ARTICLE V I	NITIAL OFFICERS AND/OR DIRECTO	<u>RS</u>	
Name and Title	e:Josef Silny, President	Name and Title: June Siln	y, Vice President
Address:	7101 SW 102 Avenue		
	Miami, FL 33173	<u>Miami, Fl</u>	_ 33173
			
Name and Title	e:	Name and Title:	
Address:		Address:	
711101055.			
	e:		
Address:		Address:	
	REGISTERED AGENT		
	da street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Josef Silny	<u> </u>	
Address:	7101 SW 102 Avenue	<u></u>	
	Miami, FL 33173		
ARTICLE VII 1	NCORPORATOR		
	ess of the Incorporator is:		
Name:	Josef Silny		
Address:	7101 SW 102 Avenue		
	.Miami, FL 33173	<u> </u>	
Havina haan namaa	l as registered agent to accept service of proce	oss for the above stated compare	tion at the place designated
	familiar with and accept the appointment as re		
		garante and	
	1) en/1/5/		2/2/1948
	Required Signature/Registered Agent		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.

Required Signature/Incorporator

Date