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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 MAY -3 PM 2:57

APPROVAL
AND
FILED

56
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COVER LETTER

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

SUBJECT: MUNOZ PHOTOGRAPHY, 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: Mario Munoz, Jr.
Name (Printed or typed)

664 West Oakland Park Blvd.
Address

Wilton Manors, FL 33311
City, State & Zip

954-564-7150
Daytime Telephone number

MarioMunozJr@mac.com
E-mail address: (to be used for future annual report notification)

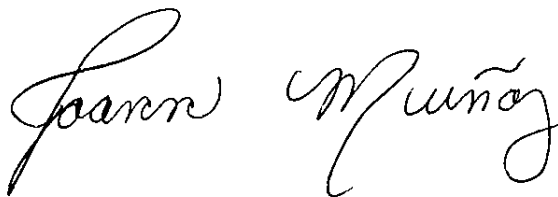
NOTE: Please provide the original and one copy of the articles.

4-20-2011

To whom it may concern,

I Joann Munoz hereby wish to release the name, Munoz Photography, Inc. to my sons Tomas and Mario Munoz, Jr. and I have no intentions of reinstating this name.

Sincerely, Joann Munoz

A handwritten signature in cursive script that reads "Joann Munoz". The signature is written in dark ink and is positioned to the right of the typed name "Sincerely, Joann Munoz".

Cell: 954.410.6431

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 MAY -3 PM 2:57

APPROVED
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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: **MUNOZ PHOTOGRAPHY, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
**664 WEST OAKLAND PARK BLVD.
WILTON MANORS, FL 33311**

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

**ANY AND ALL LAWFUL BUSINESS. PHOTOGRAPHY STUDIO SPECIALIZING IN STUDIO
AND EVENT PHOTOGRAPHY.**

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **TOMAS J. MUNOZ - P**
Address: **664 WEST OAKLAND PARK BLVD.
WILTON MANORS, FL 33311**

Name and Title: _____
Address: _____

Name and Title: **MARIO MUNOZ, JR. - VPT**
Address: **664 WEST OAKLAND PARK BLVD.
WILTON MANORS, FL 33311**

Name and Title: _____
Address: _____

Name and Title: **MARCELIANO MUNOZ - VP**
Address: **664 WEST OAKLAND PARK BLVD.
WILTON MANORS, FL 33311**

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: **MARIO MUNOZ, JR.**
Address: **664 WEST OAKLAND PARK BLVD.
WILTON MANORS, FL 33311**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **MARIO MUNOZ, JR.**
Address: **664 WEST OAKLAND PARK BLVD.
WILTON MANORS, FL 33311**

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



Required Signature/Registered Agent

11 MAY - 3 12:04 PM
SECRETARY OF STATE
TALLAHASSEE, FL
4-27-2011
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.



Required Signature/Incorporator

4-27-2011
Date