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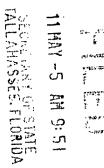
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(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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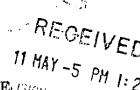
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W11-21281





FLORIDA DEPARTMENT OF STATE ISLON OF CORPORATIONS

April 26, 2011

STEVIE DORSEY 802 WEST TIFFANY DR. APT. 4 WEST PALM BEACH, FL 33407

SUBJECT: S & S LIBRA CORP Ref. Number: W11000021281

We have received your document for S & S LIBRA CORP and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director titleinformation. http://www.sunbiz.org/titledef.html.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6949.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 011A00009196



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 18, 2011

STEVIE DORSEY 802 WEST TIFFANY DR. APT. 4 WEST PALM BEACH, FL 33407

SUBJECT: S & S LIBRA CORP Ref. Number: W11000021281

We have received your document for S & S LIBRA CORP and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the City Name in its entirety; abbreviation is not acceptable.

The registered agent must have a Florida street address. A post office box is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6949.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 011A00009196

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JUSTON OF CORPORATIONS

www.sunbiz.org

Division of Compositions DO DOV 6207 Tellahassas Florida 2021

COVER LETTER

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

SUBJECT: 3+3 Libra (PROPOSED CORPORATE N	AME - MUST INCLUDE SUFFIX)	
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:		
\$70.00 Filing Fee & Certificate of Status	\$87.50 Filing Fee, & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED	
FROM: Stevie Do Port Apt 4 802 West Infant Dr Apt 4 West Palm Boach FL 33407 City, State & Zip Daytime Telephone number		
E-mail address: (to be used for t	uture annual report notification)	

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

ARTICLES OF INCORPORATION

Libra Corp ARTICLE I NAME The name of the corporation shall be: ARTICLE II PRINCIPAL OFFICE rincipal street address Mailing address, if different is: ARTICLE III **PURPOSE** The purpose for which the corporation is organized is: The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Name and Title Address: Address: Name and Title Name and Title: Address: Address: ame and Title: 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: Address: ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: ហ Address: 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 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. 4-12-2011 Date

Required Signature/Incorporator

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