29807000119

(Requestor's Name)
(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



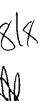
900210662399

08/05/11--01016--021 **78.75



AUG -5 PH 2: 29





COVER LETTER

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

Art by Danie	el itzier inc.
SUBJECT:(PROPOSED CORPOR	ATE NAME - MUST INCLUDE SUFFIX)
Enclosed are an original and one (1) copy of the ar \$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee, & Certified Copy
	& Certificate of Status ADDITIONAL COPY REQUIRED
FROM: Daniel Itzle	e (Printed or typed)
7789 Charney L	
Boca Raton	, FL 33496 , State & Zip
	9-0062 Telephone number
Ditzler1@b	ellsouth.net

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)

RTICLE II	PRINCIPAL OFFICE			
	Principal street address	Mailing addre	ess, if different is:	
	7789 Charney Lane Boca Raton, Fl 33496			
	PURPOSE			
e purpose for art Work	which the corporation is organized is:			
RTICLE IV	SHARES		·	
	ares of stock is: 500			
	INITIAL OFFICERS AND/OR DIRECTORS			
Name and Address:	Title: Daniel Itzler President	Name and Title: Address:		
Address:	7789 Chamey Lane Boca Raton, FL 33496			
V	Tial	Name and Tiste.		
Name and Address:	Title:		-	
Address:				
	201.1	N. Imid		
	Title:		بالبيس يقربن	
		Address.		
		·		
			7.5	
	REGISTERED AGENT	4	数数 ウ	
	lorida street address (P.O. Box NOT acceptable) of Daniel lizier 7789 Charney Lane Boca Raton, FL 3349			
Name: Address:		, 0		٧,.٠
Audios.		•	1955 S	
		•	.⊋∺ 23 24	
TICLE VII	INCORPORATOR			
name and a Name:	ddress of the Incorporator is:	••	•	
Address:	Daniel Itzler 7789 Charnev Lane Boca Raton, Ft 3349	<i>P</i> 0		
		•		
ving been na	ned as registered agent to accept service of process	for the above stated corporati	ion at the place designar	ted in
cerujicuie, i	am familiar with and accept the appointment as regis	sterea agent ana agree to act ti	n inis capacity	
	1 000 D A 000		Y 12/1/	
	Required Signature/Registered Agent		1 704/ //	
	s comes suppartice/x enicieren a gent		Date	
	reduired Significant Registered Agent			
bmit this do	rument and affirm that the facts stated herein are i	true. I am aware that the fals	se information submitted	in a
ibmit this document to the	cument and affirm that the facts stated herein are in Department of State constitutes a third degree felony	true. I am aware that the fals as provided for in s.817.155, I	se information submitted	in a
ibmit this doc	rument and affirm that the facts stated herein are i	true. I am aware that the fals as provided for in s.817.155, I	se information submitted F.S.	in a