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(Requestor's Name)			
(Address)			
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(Address)			
(City/State/Zip/Phone #)			
<u> </u>			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Dusiness Littly Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



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SELECTION OF STATE

K 10/06/11

COVER LETTER

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

SUBJECT: Meeks Expressions Co).
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM: Shemeka L. McNair Name	(Printed or typed)
1423 North Buena Vista	Avenue
	Address
Orlando, FL 32818	State & Zip
321-947-1342 Daytime To	elephone number
mcnair 08@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
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE 1 The name of the cor	Meeks Expressions Co.		
ARTICLE II	PRINCIPAL OFFICE		
	Principal <u>street</u> address 123 North Buena Vista Avenue Iando, FL 32808	Mailir	ng address, if different is:
ARTICLE III	PURPOSE		
	ich the corporation is organized is: I Sale a Christian Line of Greeting Card	S	
The number of share	SHARES s of stock is 1 INITIAL OFFICERS AND/OR DIRECTORS		
	e:Shemeka L. McNair Tocket offices No 1423 North Buena Vista Avenue Ad Orlando, FL 32818	ldress:	
Name and Tit Address:	N: N: A:	ldress:	
Name and Tit Address:	e: Na		
ADDICE DE	PAINTED ACIDAD		<u> </u>
	REGISTERED AGENT Ida street address (P.O. Box NOT acceptable) of the Shemeka L, McNair	registered agent is:	TAR T
Address:	1423 North Buena Vista Avenue Orlando, FL 32818		
ARTICLE VII	INCORPORATOR		n III . "
The <u>name and add</u> Name:	ess of the Incorporator is:		SE B
Address:	Shemeka L. McNair 1423 North Buena Vista Avenue Orlando, FL 32818		9 8 9
Having been named this certificate, I am	as registered agent to accept service of process for familiar with and accept the appointment as registered.	the above stated co ed agent and agree	orporation at the place designated in to act in this capacity
S.W.	walke 20 dags & Mills		09/30/2011
	Required Signature/Registered Agent		Date
	nent and affirm that the facts stated herein are true vartment of State constitutes a third degree felony as p		
De	Required Signature Incorporator		09/30/2011 Date