P/2000038854

(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:				





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SECRETARY OF STATE
TALLAHASSEE, FLORIG

1 04/26/12

COVER LETTER

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

_{SUBJECT:} Pink Parrot Ventures Ir	nc
(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 \$78.75 Filing Fee & Certificate of Status	\$87.50 Filing Fee & Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED
FROM: Marcia F Haeffner	(Printed or typed)
1545 Providence Blvd	Address
Deltona, FL 32725	State & Zip
(386) 675-5065 Daytime Te	elephone number
mhaeffner@att.net E-mail address: (to be used	l 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 I The name of the corp	VAME Pink Parrot Venture poration shall be:	s Inc			
ARTICLE II I	PRINCIPAL OFFICE				
P	Principal street address	Mailing addr	ess, if different is:		
<u>15</u>	45 Providence Blvd		· · · · · · · · · · · · · · · · · · ·		
<u>De</u>	ltona, FL 32725				
ADMICE DIE	rinnog n				
ARTICLE III P					
	ch the corporation is organized is:				
E-commerce.	Online products and services.				
ARTICLE IV S					
The number of shares	s of stock is:100				
ARTICLE V I	NITIAL OFFICERS AND/OR DIREC	TORS			
Name and Title	:Marcia F Haeffner, Director	Name and Title:			
Address:	1545 Providence Blvd	Address:			
	Deltona, FL 32725				
N 3 Tial.		Manager at 170'd			
Address:					
Address:	<u> </u>	Address:			
					
Name and Title	2:	Name and Title:			
Address:					
ARTICLE VI R	POISTEDED ACENT		¢		
	EGISTERED AGENT la street address (P.O. Box NOT acceptab	la) of the registered egent is:	· —		
Name:	Marcia F Haeffner	· · · · · · · · · · · · · · · · · · ·	₽ ₽ 7		
Address:	1545 Providence Blvd		Samuel Samuel		
Addiess,	Deltona, FL 32725				
	Tanini, I L. W. I. Z.		50° N		
ARTICLE VII I	NCORPORATOR		SE S		
	ss of the Incorporator is:				
Name:	Marcia E Haeffner				
Address:	1545 Providence Blvd		PM 12: 50 OF STATE		
	Deltona, FL 32725		Z: 50 ORID		
Havina haan namad	as registered agent to accept service of pr	pages for the above stated company	>		
	as registered agent to accept service of pr familiar with and accept the appointment a				
-			н тіз сарасну		
MAGACIA	Thurkun F Required Signature/Registered Agent F Haeffner		4-22-12		
111100000	Required Signature/Registered Agent		<u> </u>		
Marcia	FHaeffner		to the W		
I submit this docume	ent and affirm that the facts stated herein	are true. I am aware that the fals	se information submitted in a		
	artment of State constitutes a third degree f				
	2 1/2.11	•	1 00 10		
Maria	1 Hulfrer		4.22.12		
1.0	Required Digitature/Incorporator F Haeffner		Date		
rvara	ar Haettner				