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Certificate	s of Status			
Special Instructions to Filing Officer:				
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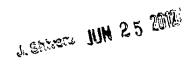
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COVER LETTER

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

SUBJECT: SHA'S ACTIVE WEAR AND PRODUCTS INC.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the art	ticles of incorporation ar	nd a check for:	1	
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL C	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED		
FROM: SHARON BLAKE	ne (Printed or typed)			
736 NW 89th AVENUE	Address	TALL AI	2012	
736 NW 89th AVENUE Address PLANTATION, FLORIDA 33324 City, State & Zip				
954-815-4792 Daytime	Telephone number	FLORIDA		
sherry 334@hotmail.co	om ed for future annual repor		•••	

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 cor		ND PRODUCTS	S INC.		
73	PRINCIPAL OFFICE Principal street address BE NW 89th AVENUE ANTATION, FLORIDA 33324	Maili	ing address, if different is:		
To sell Create dance wear, a	PURPOSE ich the corporation is organized is: , design ,manufacture,market and dis nd all products appurtenant thereto N nally and Internationally to accomplis	ationally and Inte	ernationally. To maintain		
ARTICLE IV The number of share	SHARES es of stock is:1000 @ 50 CENTS PAR VA	LUE	•		
	INITIAL OFFICERS AND/OR DIRECTOR le:Sharon Blake/President 736 NW 89th Avenue Plantation,Florida_33324	Name and Title: Address:			
Name and Tit Address:	le:RAPHAEL BROWN/SECRETARY/TREASURER 736 NW 89th Avenue Plantation Florida 33324	Address:			
Name and Tit Address:	le:	Address:			
	REGISTERED AGENT		2012 7412		
	ida street address (P.O. Box NOT acceptable) of		58 2		
Name: Address:	Sharon Blake 736 NW 89th Avenue Plantation, Florida 33324	_	JUN 22 AHASSE		
ARTICLE VII	INCORPORATOR				
	ress of the Incorporator is:		PERM		
Name:	George L. Moxon Esq.	-			
Address:	5630 Harding Street Hollywood, Florida 33021	- -			
Having been name this certificate, I an	d as registered agent to accept service of process a familiar with and accept the appointment as region for the service of process Required Signature/Registered Agent	for the above stated of stered agent and agree	corporation at the place designated in e to act in this capacity 6 / 19 / 12 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.					
4	for (Miton)	province j VI 111 310.	6/19/12 Date		
	Required Signature/Incorporator		Date		