P12000062076

		•			
(Red	questor's Name)				
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	s of Status			
Special Instructions to Filing Officer:					
•					

Office Use Only



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06/06/12--01025--002 **78.75

M2-51227 SECRETARY OF STATE OIVISION OF CORPORATIONS

Bm 7/16/12

COVER LETTER

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

SUBJECT: SISTAGROW), Inc
(PROPOSED)CORPOR	ATE NAME - MUST INCLUDE SUFFIX)
Enclosed are an original and one (1) copy of the art	ticles of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED
	·
FROM: SISTAGROW	e (Printed or typed)
111 NW 2 ND STRET	Address
Fort Lauderdale, FL 33	301 , State & Zip
954-980-0011	Telephone number
cat12mlp@gmail.com	ed for future annual report notification)

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



June 7, 2012

CATHERINE MALCOM 111 NW 2ND STREET FORT LAUDERDALE, FL 33322

SUBJECT: SISTAGROW, INC Ref. Number: W12000031227

We have received your document for SISTAGROW, INC 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 document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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) 245-6052.

Tim Burch Regulatory Specialist II New Filing Section

Letter Number: 912A00016181

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

ARTICLE I The name of the	NAME Sistagrow, Inc corporation shall be:			
ARTICLE II	PRINCIPAL OFFICE Principal street address 111 NW 2nd Street Fort Lauderdale, FL 33301	Mailing address, if different is: 111 NW 2nd Steet Fort Lauderdale, FL 33301		
ARTICLE III The purpose for	PURPOSE which the corporation is organized is: EMPC	OWERME	NT OF	WOMEN
ARTICLE IV	SHARES hares of stock is: 1000	•		
Name and Address:	INITIAL OFFICERS AND/OR DIRECTORS Title: Catherine Malcolm - CEO 111 NW 2nd Street Fort Lauderdale, FL 33322		111 NW 2nd	ith - Secretary Street ale, FL 33322
Name and Address:	Title: Diedre Malcolm - Vice President 111 NW 2nd Street Fort Lauderdale, FL 33322	Name and Title Address:		
Name and Address:	Title: Susan Nations - Tresurer 111 NW 2nd Street Fort Lauderdale, FL 33322			BECR DIVISION
	REGISTERED AGENT Torida street address (P.O. Box NOT acceptable) of t Susan Nation 111 NW 2nd Street Fort Lauderdale, FL 33322	the registered age	nt is:	FILES TARY OF STA
ARTICLE VII The name and a Name: Address:	INCORPORATOR Indexis of the Incorporator is: Catherine Malcolm			- 15 TE
Having been na this certificate, I	amed a registered agent to accept service of process emfandlar with and accept the appointment as regis	for the above sta stered agent and a	ated corporation a agree to act in this	the place designated in capacity
	cument and affirm that the facts stated herein are to Department of State constitutes a third degree felony			formation submitted in a
	Required Signature/Incorporator		<u>.</u>	5-31-2012 Date