

P12000066312

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_    Certificates of Status \_\_\_\_\_

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12 JUL 30 PM 12: 56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRS  
7/31/12

1117-26862

**COVER LETTER**

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

**SUBJECT: TZANDRA BE ONE BE MORE BE FREE**  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee  
 \$78.75 Filing Fee & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: TZANDRA EUGENIA URGELLES  
Name (Printed or typed)

P. O. Box 139, 17014 Collins Avenue  
Address

Sunny Island, FL 33160  
City, State & Zip

(305) 632-4260  
Daytime Telephone number

Tzandra@att.com  
E-mail address: (to be used for future annual report notification)

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



RECEIVED

12 JUN -6 AM 11:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 15, 2012

TZANDRA EUGENIA URGELLES  
PO BOX 139  
SUNNY ISLAND, FL 33160

SUBJECT: TZANDRA BE ONE BE MORE BE FREE  
Ref. Number: W12000026862

We have received your document for TZANDRA BE ONE BE MORE BE FREE 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 name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

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.

Ruby Dunlap  
Regulatory Specialist II  
New Filing Section

Letter Number: 312A00014365

[www.sunbiz.org](http://www.sunbiz.org)

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE RECEIVED  
Division of Corporations

12 JUL 30 PM 2: 52

June 13, 2012

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

TZANDRA FUCHS WIEDMAIER  
17100 N BAY ROAD  
1705  
SUNNY ISLES, FL 33160

2ND MAILING

SUBJECT: TZANDRA BE ONE BE MORE BE FREE  
Ref. Number: W12000026862

We have received your document for TZANDRA BE ONE BE MORE BE FREE 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 name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Remove the po box address from the principal office box in Article II.

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.

Ruby Dunlap  
Regulatory Specialist II  
New Filing Section

Letter Number: 312A00014365

[www.sunbiz.org](http://www.sunbiz.org)

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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12 JUL 30 PM 12:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME** Tzandra BE ONE BE MORE FREE, Inc.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
17100 N. Bay Road 1705  
Sunny Isles, FL 33160

Mailing address, if different is:  
17100 N. Bay Road 1705  
Sunny Isles, FL 33160

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
to improve the quality of life of individuals, by mans of products, programs, and specialized  
medical techniques and import and export products and equipment to further said purpose

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Tzandra Fuchs Wiedmaier Name and Title: \_\_\_\_\_  
Address: 17100 N. Bay Road 1705 Address: \_\_\_\_\_  
Sunny Isles, FL 33160 \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Tzandra Fuchs Wiedmaier  
Address: 17100 N. Bay Road 1705  
Sunny Isles, FL 33160

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Tzandra Fuchs Wiedmaier  
Address: 17100 N. Bay Road 1705  
Sunny Isles, FL 33160

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

T Fuchs Wiedmaier  
Required Signature/Registered Agent

7/3/2012  
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.

T Fuchs Wiedmaier  
Required Signature/Incorporator

7/3/2012  
Date