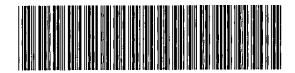
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(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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Special Instructions to Filing Officer:			
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COVER LETTER

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

SUBJECT: ADDITIVE		
	RATE NAME – <u>MUST INCLU</u>	
sed are an original and one (1) copy of the a		
\$70.00 \$78.75	\$78.75	\$87.50 Filing Fee,
Filing Fee Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Certified Copy
. at Confidence of Status	a country	& Certificate of
		Status
•	ADDITIONAL CO	PY REQUIRED
, , , , , , , , , , , , , , , , , , ,		
Touch Ch	arles Men	ende-
FROM: Joseph Ch	me (Printed or typed)	JACZ
<u> </u>	132 Avenu	
	Address	_
miami I	=1 22171	5
<u>Miami, F</u>	y, State & Zip	<u> </u>
	763 30	00
	Telephone number	
Additive	5305@gr	nail.com
	sed for future annual report no	

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



August 15, 2012

JOSEPH CHARLES MENENDEZ 3155 SW 132 AVENUE MIAMI, FL 33175

SUBJECT: ADDITIVES, CO. Ref. Number: W12000042659

We have received your document for ADDITIVES, CO. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the name of the corporation in Article I.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 212A00021049

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

The name of the o	NAME corporation shall be: ADDITEVES	S ADVERTISING, CO.
ARTICLE II	PRINCIPAL OFFICE Principal street address 7635 West 2nd Ct. Midmi FL 33014	Mailing address, if different is:
	which the corporation is organized is:	In Pularia
with Std	thin the advertate of Florida	lawful practices Hising field in the
ARTICLE V Name and Address:	INITIAL OFFICERS AND/OR DIRECTOR Title: Joseph Charles Menendez/Pr 3155 SVV 132 AVE Miami + FL 33175	Name and Title
Name and Address:	Title:	Name and Title:Address:
Name and 'Address:	Title:	
	REGISTERED AGENT Grida street address (P.O. Box NOT acceptable) of Joseph Charles Menendez 3155 5W 132 Avenue Miami, Fl. 33175	f the registered agent is:
· · · ·	INCORPORATOR Idress of the Incorporator is: Joseph Charles Menerclez 3155 SW 132 Avenue Miami, FL 33175	<u> </u>
	ned as registered agent to accept service of process am familiar with and accept the appointment as regi Required Signature/Registered Agent	s for the above stated corporation at the place designated in istered agent and agree to act in this capacity 0 8 08 2012
		true. I am aware that the false information submitted in a y as provided for in s.817.155, F.S. OSP 8/20/2 Diffe