P12000079198

(Requestor's Name)	
(Address)	
(Address)	_
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(During Faith Marra)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	_
_	
Special Instructions to Filing Officer:	
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Why have

09/06/12--01010--012 **87.50

12 SEP 17 PM 4: 35 SECRETARY OF STATE

9-18-72

COVER LETTER

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

SUBJECT: Happy Party Express, (PROPOSED CORPORA)	Inc.	
(PROPOSED CORPORA	TE NAME – <u>MUST INC</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	cles of incorporation ar	nd a check for:
energinal and one (1) copy of the arm		
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	ADDITIONAL C	OPY REQUIRED
	(Printed or typed)	
3500 NW 95TH TER.	ddress	
	rudiess	
MIAMI, FL 33147	State & Zip	
786-587-8483	elephone number	·····
Gil.Leydis@yahoo.com	for future annual renor	t notification)

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



September 7, 2012

DUVIEL RODRIGUEZ 3500 NW 95TH TERR MIAMI, FL 33147

SUBJECT: HAPPY PARTY EXPRESS, INC.

Ref. Number: W12000046322

We have received your document for HAPPY PARTY EXPRESS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete Article(s) I.

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.

Letter Number: 712A00022651

Tim Burch Regulatory Specialist II New Filing Section

www.sunbiz.org

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

ARTICLE I The name of the con	NAME rporation shall be: Happy Party	Express, I	Drc.
	PRINCIPAL OFFICE		
0.0	Principal street address		ng address, if different is:
<u>3</u>	500 NW 95TH TER. MIAMI, FL 33147		
	was the same of th		
ARTICLE III	DIDDOCE		· e
	nich the corporation is organized is:		S S
	awful Business		2. S.
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			HE - m
ARTICLE IV The number of share	~~ 		
***			္တင္ဆိုင္သိုင္သိုင္သိုင္သိုင္သိုင္သိုင္သိုင္သ
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTOR	<u>S</u>	<u>.</u> .
Name and Tit Address:	le: <u>Duviel Rodriguez, President</u> 3500 NW 95TH TER, MIAMI, FL 33147	Name and Title:	
Addiess.	3300 NVV 33 11 1 ETX. WILMWII, 1 G 03 147		
Name and Tit	le:	Name and Title:	
Address:		Address:	
	•		
	- NOTE:		
Name and Tit	le:	Name and Title:	
Address:		Address:	
			and the second tests
	REGISTERED AGENT		
The <u>name and Flor</u> Name:	ida street address (P.O. Box NOT acceptable) of Duviel Rodriguez, President	the registered agent is:	
Address:	3500 NW 95TH TER MIAMI, FL 3314	17	
114414351			
ADDICU E UU	ANCORDORATOR		
	INCORPORATOR <u>ess</u> of the Incorporator is:		
Name:	Duviel Rodriguez, President		
Address:	3500 NW 95TH TER, MIAMI, FL 3314	7	
		•	
Having been named	d as registered agent to accept service of process	for the above stated co	orporation at the place designated in
this certificate, I am	familiar with and accept the appointment as regi	stered agent and agree	to act in this capacity
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Personal		08/3/1/2
	Required Signature/Registered Agent	_	Date
I-submit this-docum	ent and affirm-that-the-facts stated-herein-are-	true:-1-am aware-that-	the false information submitted in ass
document to the Dep	partment of State constitutes a third degree felony	as provided for in s.81	/.155, F.S.
1.	for hood		09/21/12
- r V	Required Signature/Incorporator	 	Date