P13000016731

(Req	uestor's Name)			
(Address)				
(Address)				
(City	/State/Zip/Phone	; #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
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: Fai	rytale Party Rent	al Inc.	
	(PROPOSED/CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an orig	ginal and one (1) copy of the arti	icles of incorporation and	d a check for:
\$70.00	\$78.75	\$78.75	\$87.50
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of
	•	ADDITIONAL CO	Status OPY REQUIRED
			1 to 100 to
FROM:	Jennisey Rou	Printed or typed)	
	3436 W 80th S	Address Say 109	7
	Hialeah bardens	FI 33018 State & Zip	
	(305) 987 - 019 Daytime T	58 elephone number	
	Fairytaleparty	rentals@ad	notification)

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

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

The name of the corporati	on shall be: Fairytale	Party Rental I	nc.
ARTICLE II PRIM	Principal street address th St., Bay 109 pardens, Fl	,	ress, if different is:
The purpose for which the	e corporation is organized is:	arty rental =	or Kids
		·	18 FEB 19 SECRETARY
ARTICLE IV SHA The number of shares of s ARTICLE V INIT	stock is:	rors	PMI2: 07 E. PLORIDA
Name and Title	Johnsey Ravirosa (7)	Name and Title:	
Address	3436 W 80 st. Hialeah bardens, F1,3308	Address:	
Name and Title:		Name and Title:	
Address			
Name and Title:	•		
Address		Address:	

Name and Title:	Name and Title:
Address	Address: Address:
ARTICLE VI REGISTERED AGENT	
Name: Jennisey Roving Address: 12401 W Okeache Hialeah barden	obeerd., Lot 499
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is: Name: <u>Tennisey Rov</u> Address: <u>12401 W Okeec</u> Hialeah barden	Prosa hobee rd. Lot 499 5, Fl 33018
Having been named as registered agent to accept se this certificate, I am familiar with and accept the app	rvice of process for the above stated corporation at the place designated in ointment as registered agent and agree to act in this capacity $2/15/3$
Required Signature/Regist	ered Agent Date
I submit this document and affirm that the facts studocument to the Department of State constitutes a the Required Signature/Inco	2/15/13