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PICK-UP WAIT MAIL

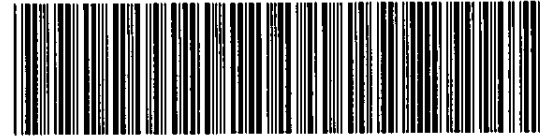
(Business Entity Name)

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TALLAHASSEE, FLORIDA

K 02/27/13

COVER LETTER

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

SUBJECT: MY ART AND COLLECTIBLES CORPORATION
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

<input type="checkbox"/> \$70.00 Filing Fee	<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certificate of Status	<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED			

FROM: JAMES L. EDWARDS
Name (Printed or typed)

5194 41ST STREET SOUTH
Address

ST. PETERSBURG, FLORIDA 33711-4716
City, State & Zip

727-867-2756
Daytime Telephone number

J.L. EDWARDS 42200 @ 9 mail.com
E-mail address: (to be used for future annual report notification)

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

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

ARTICLE I NAME

The name of the corporation shall be: MY ART AND COLLECTIBLES, CORPORATION

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5196 41ST STREET S.
SAINT PETERSBURG,
FLORIDA 33711-4716

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO BUY, COLLECT, AND SELL ART AND COLLECTIBLES.

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ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JAMES L. EDWARDS, PRES. Name and Title: MARLIN B. DAVIS, V.P.

Address: 5196 41ST STREET SOUTH Address: _____
ST. PETERSBURG, _____
FLORIDA, 33711-4716 _____

Name and Title: TIFFANY A. EDWARDS, SECRETARY Name and Title: _____

Address: 5196 41ST STREET SOUTH Address: _____
ST. PETERSBURG, _____
FLORIDA 33711-4716 _____

Name and Title: CARLA A. EDWARDS, V.P. Name and Title: _____

Address: 5196 41ST STREET SOUTH Address: _____
ST. PETERSBURG, _____
FLORIDA, 33711-4716 _____

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: JAMES L. EDWARDS
 Address: 5196 41ST STREET SOUTH
ST. PETERSBURG, FLORIDA 33711-4716

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JAMES L. EDWARDS
 Address: 5196 41ST STREET SOUTH
ST. PETERSBURG, FL 33711-4716

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

James L. Edwards
 Required Signature/Registered Agent

February 28, 2013
 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.

James L. Edwards
 Required Signature/Incorporator

February 28, 2013
 Date

JAMES L. EDWARDS