

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
(Bocument Number)					
Certified Copies Certificates of Status					
<u> </u>					
Special Instructions to Filing Officer:					

Office Use Only



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13 MAR | | PM 2: 54

SECRETARY OF STATE
DIVISION OF CORPORATIONS

in 3/12/13

COVER LETTER

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

SUBJECT: The Art of Silver Corp							
	(PROPOSED CORPORAT	E NAME – <u>MUST INCLU</u>	UDE SUFFIX)				
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:							
■ \$70.00 Filing Fed		\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED				
			·	•			
FROM: Arthur Shea							
		Printed or typed)					
3432 NE 13 Avenue							
Address							
	Fort Lauderdale, Fl	orida 33334		13 HAR I	SICE		
City, State & Zip							
954.5578454					CORF		
Daytime Telephone number					: ST		
notarnish@aol.com							
E-mail address: (to be used for future annual report notification)					<u>X</u>		

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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAM	tion shall be: The Art of Silver	Corp Statistick of Corporal
		13 MAR II PM 2: 5
	NCIPAL OFFICE Principal street address	Mailing address, if different is:
3432 NE 13 A	· ———	-
Oakland Park	, Florida 3334	
The purpose for which t	<u>POSE</u> he corporation is organized is: Selling	antiques
The purpose for which the	ne corporation is organized is.	
ARTICLE IV SHA	IRES 1	
The number of shares of	stock is:	
ARTICLE V INIT	TIAL OFFICERS AND/OR DIRECTO	RS
	Arthur Chao	Name and Title:
	3/32 NE 13 Avenue	
Address	<u> </u>	Address:
	Oakland Park, Florida	
	33334	
Name and Title		Name and Title:
Address		Address:
Name and Title	:	Name and Title:
		•
Address		

Name and	d Title:	Name and Title:
Address		Address:
ARTICLE VI The name and Fl	<u>REGISTERED AGENT</u> <u>orida street address</u> (P.O. Box NOT acceptable) of Arthur Shea	the registered agent is:
Name:		VISE
Address:	3432 NE 13 Avenue	CRE TON
	Oakland Park, Florida 33334	= 9A
ARTICLE VII	INCORPORATOR Idress of the Incorporator is:	PH 2: 54
Name:	Arthur Shea	L JONE
Address:	3432 NE 13 Avenue	
	Oakland Park, Florida 33334	
	ned as registered agent to accept service of process am familiar with and accept the appof ni ment us rag	for the above stated corporation at the place designated in istered agent and agree to act in this capacity March 5, 2013
	Required Signature/Registered Agent	Date
	ument and affirm that the facts stated herein are Department of State constitutes a third degree felon	true. I am aware that the false information submitted in a y as provided for in s.817.155, F.S.
	(hilly Shu	March 5, 2013
	Required Signature/Incorporator	Date