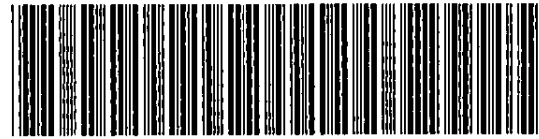


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06/24/13--01026--023 **78.75

(Requestor'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:

Office Use Only

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DIVISION OF CORPORATIONS
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J 6/25/13

COVER LETTER

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

SUBJECT: MIKEL PHOENIX INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Mikel Phoenix
Name (Printed or typed)

1000 Walker St. #377
Address

Holly Hill, Fl. 32117
City, State & Zip

386-295-1675
Daytime Telephone number

mikelphoenix@gmail.com
E-mail address: (to be used for future annual report notification)

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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)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME
The name of the corporation shall be: Mikel Phoenix, Inc.

13 JUN 24 PM 2: 17

ARTICLE II PRINCIPAL OFFICE
Principal ~~street~~ address

Mailing address, if different is:

1000 Walker St. #377
Holly Hill, Fl. 32117 ~~Handyman~~

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: handyman

ARTICLE IV SHARES 100
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Mikel Phoenix Pres/Sec</u>	Name and Title:	_____
Address	<u>1000 Walker St. #377</u>	Address:	_____
	<u>Holly Hill, Fl 32117</u>		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____

(cont.)

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: Mikel Phoenix
 Address: 1000 Walker St. #377
Holly Hill, Fl. 32117

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Mikel Phoenix
 Address: 1000 Walker St. #377
Holly Hill, Fl. 32117

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

[Handwritten Signature] _____ 6/19/2013
 Required Signature/Registered Agent 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.

[Handwritten Signature] _____ 6/19/2013
 Required Signature/Incorporator Date

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 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
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