P13000060269

(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: She want to file as a Florida (off
1/18/13 Spoke w/

Office Use Only



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SECRETARY OF STATE

1/4

COVER LETTER

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

SUBJECT:	<u>-</u>	Partners,				
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)			
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	d a check for:			
\$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status			
		ADDITIONAL CO	PY REQUIRED			
FROM:	Julie L. 1 Name 4014 Olive					
	4014 Olive Ave. Address					
Sarasota, FL. 34231						
	Sarasota, FL. 34231 City, State & Zip (804) 337-6914					
	info@enve	elephone number lope partner				
	E-mail address: (to be use	d for future annual report i	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)

	ration shall be:	,			
KIIÇME II FI	Principal <u>street</u> addre	ess	М	failing address, if differ	ent is:
4014 O'liv	e Ave.		<u></u>		
Sarasot	a, FL. 34	1231			
RTICLE III PU	RPOSE				
he purpose for which	the corporation is orga	nized is: Broy	er/Res	sell enve	lopes,
direct	mail an	d print.			
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RTICLE IV SP	IARES 1, 0	100 (enclu	osed)	TAELAHA	ت ا
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ne number of shares of	ITIAL OFFICERS AS Ide: Julie L. 19 4014 Oliv	ND/OR DIRECTOR Mullaney 12 Ave.	S Name and Title:_	SECREITARY OF WATE	13 JUL 15 PMY: 02
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RTICLE V IN Name and Ti Address Name and Tit	of stock is:	NOVOR DIRECTOR Mullaney 16 Ave. 1, FL. 34231	S Name and Title:_ Address: Name and Title: Address: Address:	NEA NEA	
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RTICLE V IN Name and Ti Address Name and Tit Address	of stock is:	Mullaney L Ave. 34231	S Name and Title:_ Address: Name and Title: Address: Address: Address:	VILE VIBA	
RTICLE V IN Name and Ti Address Name and Tit Address	e:e:e:e:e:e:e:e:	Mullaney L Ave. 34231	Name and Title:_ Address: Name and Title:_ Name and Title:_ Name and Title:_ Name and Title:_	VILE VIBA	

(conti.)

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Name and Title:	Name and Title:_	13 JUL 15 PM 1:02				
Address	Address:	SEORETARY OF STATE TACEAHASSEE FLORIDA				
ARTICLE VI REGISTERED AGENT	C.1					
Name: Jule L. Mulaneo Address: 4014 Olive Ave.		t 15:				
Address: 4014 Olive Ave. Sanasota, Fl. 34231						
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:						
	00					
Name: ////////////////////////////////////	<u>e</u> 11.					
Address: 3211 Shannon Roa	ع عورب کے رائی	,20				
Name: Timothy A. Nordgr Address: 3211 Shannen Rod Dicham, NC 2770	7					
Having been named as registered agent to accept service of proces this certificate, I am familiar with and accept the appointment as re						
Required Signature/Registered Agent		Mg 23 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.						
Required Signature/Incorporator	nor annunum visit til förrettinna til en	May 28,2013 Date itre				
Sign here		1 Direttre				