## P400039162

(Re	questor's Name)	
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(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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SECRETARY OF STATE
SECRETARY OF

W14-24093

## **COVER LETTER**

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

SUBJECT: COLORES (USA), 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 \$78.75 **378.75** \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED

FROM:	Mark Messersmith
	Name (Printed or typed)
	6306 Benjamin Road Ste 600
	Address
	Tampa, FL 33634
	City, State & Zip
	813-888-9855
	Daytime Telephone number
	mmessersmith@biosunffi.com
	E-mail address: (to be used for future annual report notification)

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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 16, 2014

MARK MESSERSMITH 6306 BENJAMIN RD SUITE 600 TAMPA, FL 33634

SUBJECT: COLORES (USA), INC. Ref. Number: W14000024093

We have received your document for COLORES (USA), INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 714A00008150

www.sunbiz.org

Division of Comparations D.O. POV 6997 Tellahoggas Florida 29914

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

ARTICLE I NAM The name of the corporat	E COLORES (USA)	INC.	
ARTICLE II PRII	NCIPAL OFFICE Principal <u>street</u> address		dress, if different is:
6306 Benjamir	n Road		
Suite 600			
Tampa, FL 33	3634		
and distributio	POSE ne corporation is organized is:  To estain the purpose of the purpose or the		
U.S.			
			<b>-</b>
			SEC R
			HAY -
ARTICLE IV SHA The number of shares of s	RES stock is: 600		-2 AM
ARTICLE V INIT	IAL OFFICERS AND/OR DIRECTOR	S	[2] <b>않</b>
	Mark Messersmith, CEO	Name and Title:	55 10A
Address	14618 Mirasol Manor Ct	Address:	
	Tampa, FL 33626		
Name and Title:		Name and Title:	
Address			
Name and Title:		Name and Title:	
Address		Address:	

		•
Addre	ess	Address:
ARTICLE VI	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable) o	f the registered accept in
Name:	Mark Messersmith	The registered agent is.
Address:	14618 Mirasol Manor Ct	-
	Tampa, FL 33626	<del>-</del> -
ARTICLE VI	I INCORPORATOR	
The name and	address of the Incorporator is:	·
Name:	Mark Messersmith	
	14618 Mirasol Manor Ct	
Address:		
Address;	Tampa, FL 33626	<del>-</del> -
Having been no	Tampa, FL 33626  amed as registered agent to accept service of process I am familiar with and accept the appointment as reg	eistered agent and agree to act in this capacity April 1, 2014
Having been no this certificate,	Tampa, FL 33626  amed as registered agent to accept service of process I am familiar with and accept the appointment as reg  Required Signature/Registered Agent	April 1, 2014  Date
Having been no this certificate,	Tampa, FL 33626  amed as registered agent to accept service of process I am familiar with and accept the appointment as reg	April 1, 2014  Date  true. I am aware that the false information submittee
Having been not this certificate,  I submit this dedocument to the	Tampa, FL 33626  amed as registered agent to accept service of process I am familiar with and accept the appointment as regional Required Signature/Registered Agent ocument and affirm that the facts stated herein are to Department of State constitutes a third degree feloment	April 1, 2014  Date  true. I am aware that the false information submitted as provided for in s.817.155, F.S.  April 1, 201
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