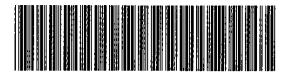
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Office Use Only



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FILING CANCELLED RETURNED CHECK

05/02/14--01017--025 **87.50



COVER LETTER

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

SUBJECT: Byzantium Jewelers International 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 ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	

·MO	Mike P Roussos
	Name (Printed or typed)
	12810 Teakwood Lane
•	Address
	Hudson, FL 34667
•	City, State & Zip
	727-485-3942
•	Daytime Telephone number
_	mr1969mr@gmail.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)

Principal office Principal street address 12810 Teakwood Lane		Mailing address, if different is:	
udson , FL	34667		
RTICLE III PUR ne purpose for which Manufac	the corporation is organized is: To prove	ride any lawful and Reta	business
			SEGRE TALLAR
RTICLE IV SH e number of shares o	D E-FRY 11	G CANCELLI RNED CHEC	<u> </u>
	TIAL OFFICERS AND/OR DIRECTOR Mike P Roussos Officer	_	
	Mike P Pousses Officer	Name and Title:	
Name and Tit	Mike P Roussos Officer 12810 Teakwood Lane	Name and Title: Address: Name and Title: Address:	

Name	and Title:	Name and Title:
Addre	ess	Address:
ARTICLE VI The name and Name:		FILING CANCELLED the registered agent is: RETURNED CHECK
Address;	12810 Teakwood Lane	•
	Hudson, FL 34667	₹or ₹
<u>ARTICLE VI</u>	I INCORPORATOR	HAY -2
The name and	address of the Incorporator is:	mg 🕦 🛅
Name:	Mike P Roussos	EFLORID.
Address:	12810 Teakwood Lane	ATE ATE
	Hudson , FL 34667	
Having been n this certificate,	amed as registered agent to accept service of process for I am familiar with and accept the appointment as regis	or the above stated corporation at the place designated in tered agent and agree to act in this capacity
	MIKE RIVSO	04/28/2014
	Required Signature/Registered Agent	Date
	ocument and affirm that the facts stated herein are tr e Department of State constitutes a third degree felony o	ue. I am aware that the false information submitted in a as provided for in s.817.155, F.S.
	MIKE PASCO	04/28/2014
	Required Signature/Incorporator	Date