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SECRETARY OF STATE

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COVER LETTER

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

SUBJECT: I YE	E PRESS INC.		
	(PROPOSED CORPOR	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d 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 CO	PY REQUIRED
_	Radisson Plazas	e (Printed or typed) S, Suite 800	
N	ew Rochelle, NY	Address 10801	
87	77-330-2677	State & Zip	
		Telephone number	
ro	bertdollar_@bellso		
	E-mail address: (to be use	ed 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)

7821 SouthWe	<u>VCIPAL OFFICE</u> Principal <u>street</u> address est 99th Street		Mailing address, if different is: SouthWest 99th Stre	et
Miami, FL 331	56	Miam	i, FL 33156	
The purpose for which the	POSE ne corporation is organized is: Superintendent's Guide and promote the servi	ces of the author, I	Robert N. Dollar, as construction con	sultant.
			16 WVA 8 WW 3: 81	ORGAN ASSESSED AS NOTSINE
The number of shares of				
Name and Title	7821 SW 99TH STREET	S Name and Title. Address:	7821 SW 99TH STRE	
Name and Title	ROBERT DOLLAR - PRESIDENT	Name and Title. Address:	·	ET

Name and	l Title:	Name and Title:
Address		Address:
ARTICLE VI The name and Flo	REGISTERED AGENT Drida street address (P.O. Box NOT acceptable) of ROBERT DOLLAR	the registered agent is:
Address:	7821 SOUTHWEST 99TH STREET	
Address.	MIAMI, FL 33156	
ARTICLE VII	INCORPORATOR	
The name and ad	dress of the Incorporator is:	
Name:	MyUSAcorporation.com	
Address:	1 Radisson Plaza, Suite 800	
	New Rochelle, NY 10801	
	ned as registered agent to accept service of process im familiar with and accept the appointment as reg Required Signature/Registered Agent	1.10-1004
I submit this document to the L	ument and affirm that the facts stated herein are Department of State constitutes a third degree felon Required Signature/Incorporator	true. I am aware that the false information submitted in a y as provided for in s.817.155, F.S. 4/25/20/4 Date

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