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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 : (305)552-5973

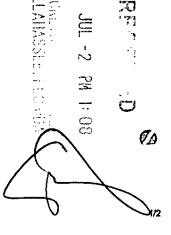
: (305)675-5944 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:	
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## FLORIDA PROFIT/NON PROFIT CORPORATION GREAT NANNIES & HOUSEKEEPING BY ISABELLA INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75



7-7-14

Florida Department of State

Attention: New Filings Section

To whom it may concern:

This is to advise you that the owners of BY ISABEIIA INC., of Doc #

P12\_0000 11503 are the same owners of the attached articles of incorporation. We have dissolved the company and have no intention of reopening it. Thank you for your help in this matter.

Very Sincerely,

Isabell Forge 7/1/14

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

ARTICLE I NAME: The name of the corporation is:				
GREAT W	ANNIES & HOUSE KEEPING	By -		
•	ARTICLE II PRINCIPAL OFFICE: 15ABELLA	INC.		
· The	principal street address and mailing address is:			
16	375 NE 18 B AVE	•		
	suite 323			
NO.	MIAMI BCH. FL 33162			
ARTICLE III SE	ARES: The number of shares of stock is: 500	14 111-2		
ARTICLE I	V INITIAL DIRECTORS AND/OR OFFICERS:	H 10: 03		
	A-BELLA TORGE (P)			
16	375 NE 18th AVE	9		
	suite 323			
No	, MIAMI BCH, FL 33162	-		
		•		
ARTICLE V D	VITTAL REGISTERED AGENT AND STREET ADDRESS:			
	a street address (PO Box not acceptable) of the registered agent is:			
<i></i>	ABELLA TORGE	•		
163	15 N.E. 18H AVE.			
·	SUITE 323 MIAMI BCH, FL, 331621			
<b>N.</b>	MIAMI BCH, FL. 33162,			
	NCORPORATOR: The name and address of the Incorporator is:			
	ABELLA JORGE	•		
16	375 NE 18th AVE.	•		
	SUITE 323			
N	MIAMI BCH. FL 3316Z			

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#7036 P. 005/006

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## Required Signatures:

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

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.