(Requestor's Name)				
(Ad	dress)			
(Ad	ldress)			
•	,			
(Cit	ty/State/Zip/Phone	- #N		
(Cil	ty/State/Zip/F110116	, 11)		
PICK-UP	WAIT	MAIL .		
(Bu	siness Entity Nan	ne)		
(3.		,		
(Do	ocument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer			
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Office Use Only



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1114-629



October 15, 2014

STEPHANO'S TECH AND DESIGNS 13255 S.W. 137TH AVE., SUITE 201 MIAMI, FL 33186

SUBJECT: STEPHANO'S TECH AND DESIGNS

Ref. Number: W14000062921

We have received your document for STEPHANO'S TECH AND DESIGNS and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of 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.

Maryanne Dickey Regulatory Specialist II New Filing Section

Letter Number: 414A00022104

· COVER LETTER

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

SUBJECT:	ephano's Tech and Designs (Co.		
SUBSECT.	(PROPOSED CORPO	RATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an	original and one (1) copy of the	articles of incorporation an	d a check for:	
\$70.0 \$70.0 Filing Fo	· · · · ·	\$78.75 Filing Fee & Certified Copy	& Certificate of Status	
		ADDITIONAL CO	JPY REQUIRED	
	V			
Stephano's Tech and Designs Co. FROM:				
221011	Na	ume (Printed or typed)		
•				
	Address			
	Miami, Florida, 33186			
	City, State & Zip			
	7865396037			
	Daytime Telephone number			
	stephanocardona92@hotma	ail.com		
	E-mail address: (to be a	ised 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)

ARTICLE I NAI		esigns Co.
The name of the corpora	ation shall be:	
ARTICLE II PRI	NCIPAL OFFICE	C C
	Principal street address	Mailing address, if different is
13255 SW 137th		ere was the second of the sec
Miami,Florida,331	186	70. N
		SALE ORIO
40/01010101 NT	noon = :	7.7
The purpose for which t	POSE Family 0\	wned business
The purpose to: Which		
	-,	
<u> </u>		
ARTICLE IV SHA	<u>1,000</u>	
The number of shares of	stock is:	
ARTICLE V INI	TIAL OFFICERS AND/OR DIRECTOR	<u>88</u>
33 t milit	Stephano Cardona	No. of the state o
Name and Title		Name and Title:
Address	13255 SW 137th Ave Suite 201	Address:
Address	Miami, Florida, 33186	Address.
	Mam, Iona,55 roo	
	. <u></u>	
Name and Title		Name and Title:
		Traine and Title.
Address		Address:
		_
Name and Title	<u></u>	Name and Title:
Address		_ Address:

Name an	d Title:	Name and Title:	
Address		Address:	
			Ac 7
		-	DCT 2
ARTICLE VI	REGISTERED AGENT		SEE ON :
	orida street address (P.O. Box NOT acceptable) or	f the registered agent is:	PM 2
Name:	Stephano Cardona	_	ES N
Address:	13255 SW 137th Ave Suite 201	_	: 30 TATE ORIDA
	Miami,Florida,33186	<u>.</u>	
ARTICLE VII The name and ad	INCORPORATOR dress of the Incorporator is:		
Name:	Stephano Cardona	_	
Address:	13255 SW 137th Ave Suite 201	_	
	Miami,Florida,33186	_	
Having been nan this certificate, I	ned as registered agent to accept service of process on familiar with and accept the appointment as reg	for the above stated corpor ristered agent and agree to a	ation at the place designated in ct in this capacity 10/02/2014
$\overline{}$	Removed Signature/Registered Agent		Date
I submit this document to the	ument and affirm that the facts stated heroin are Separtment of State fonshifties a third degree felon	true. I am aware that the fo y as provided for in s.817.15	alse information submitted in a 5, F.S.
			10/02/2014
	Required a gnature Incorpolator		Date