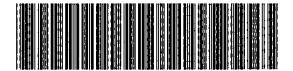
P14D00088642

| (Re | questor's Name) | |
|-------------------------|--------------------|-------------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | ry/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

OCT 3 0 2014)

T. SCOTT



800265703768

10/29/14--01007--010 **70.00

辦OCT 29 PM 1:12

COVER LETTER

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

| SUBJECT: | The | Crows | Nest 7 | Tattoo | Parlor | Miami | Inc. |
|----------|-----|-------|----------|-----------|-----------|------------|--------|
| | | (PROP | OSED COR | PORATE NA | ME - MUST | INCLUDE SI | (FFIX) |

| Enclosed are an original | inal and one (1) copy of the ar | ticles 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 |

| Raul Santana | |
|----------------|-------------------------|
| | Name (Printed or typed) |
| 3941 NW 11th | street |
| | Address |
| Miami, Florida | , 33126 |
| | City, State & Zip |
| 305-318-6875 | |
| Ds | aytime Telephone number |

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)

| et 2 s organized is: ANY AN | D ALL LAWF | UL BUSINESS | MOCT 29 PM 1: 1 | The state of the s |
|--------------------------------|---|---|--|--|
| | D ALL LAWF | UL BUSINESS | OCT 29 PM | |
| 3 | | | OCT 29 PM | |
| 3 | | | | |
| | <u> </u> | | 2 | |
| ana President | _ | | | |
| N 11th street Florida 33126 | Address: | | | |
| | Address: | | | |
| | Name and Title: | | | |
| | ana President V 11th street Florida 33126 | N 11th street Florida 33126 Name and Title: Name and Title: | ana President Name and Title: Address: Name and Title: Name and Title: Name and Title: Name and Title: | Address: Name and Title: Name and Title: Address: Name and Title: Name and Title: Name and Title: |

| Addre | ess | Address: | | |
|---------------------|--|-------------------------|---|--|
| | | | | |
| ARTICLE VI | REGISTERED AGENT Florida street address (P.O. Box NOT acceptable) of the | no mediatawah aramtika | | |
| | Raul Santana | ic registered agent 15. | | |
| Name: Address: | 3941 NW 11th Street | | 0CT 2 | |
| Audiess. | Miami, Florida 33126 | | 9 (%) % 19 49 (%) | |
| ARTICLE VI | I INCORPORATOR | | - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 | |
| The <u>name and</u> | address of the Incorporator is: | | ., | |
| Name: | Raul Santana | | | |
| Address: | 3941 NW 11th Street | | | |
| | Miami, Florida 33126 | • | | |
| | amed as registered agent to accept service of process for I am familiar with and accept the appointment as regist | | | |
| Gul Aut | | 10/ | 10/14/2014 | |
| | Required Signature/Registered Agent | | Date | |
| | ocument and affirm that the facts stated herein are tri e Department of State constitutes <u>a third deg</u> ree felony o | | mation submitted in a | |
| | Il - Next | 10 | /14/2014 | |
| 7 | Required Signature/Incorporator | | Date | |

Name and Title:______ Name and Title:_____