

P14000099809

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

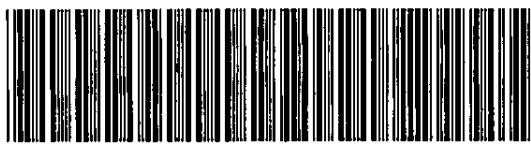
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DEC 15 2014

T. SCOTT



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REGISTRATION DIVISION



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 18, 2014

ISIS ARJONA
1004 CAMA COURT
WINTER SPRINGS, FL 32708

SUBJECT: A TASTE OF HAPPINESS
Ref. Number: W14000010559

We have received your document for A TASTE OF HAPPINESS and your check(s) totaling \$70.00. 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.

The person designated as incorporator in the document and the person signing as incorporator must be the same.

The registered agent must sign accepting the designation.

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.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 314A00003633

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

ARTICLE I NAME

The name of the corporation shall be: A Taste of Happiness, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1004 Cama Court
Winter Springs, Fl
32708

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The corporations is organized to provide private catering and public food services.

ARTICLE IV SHARES 2

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Isis Arjona P
Address: 1004 Cama Court
Winter Springs
Fl, 32708

Name and Title: _____
Address: _____

Name and Title: Juan Arjona VS
Address: 1004 Cama Court
Winter Springs
Fl, 32708

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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SYSTEM FOR THE
DIVISION OF
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(conti.)

Name and Title: _____ Name and Title: _____
 Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Isis Arjona
 Address: 1004 Cama Court
Winter Springs, FI 32708

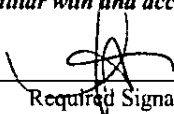
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 DIVISION OF CORPORATIONS
 STATE OF FLORIDA

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Juan Arjona
 Address: 1004 Cama Court
Winter Springs, FI 32708

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




 Required Signature/Registered Agent

10 Feb 2014

 Date

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.



 Required Signature/Incorporator

10 Feb 2014

 Date