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(Re	equestor's Name)			
(Address)				
(Ac	idress)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bı	usiness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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	. <u>.</u>			

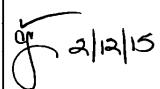
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SECRETARY OF STATE



COVER LETTER

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

_{subject:} Ms.	Senior NYC, Inc		· .
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d 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
FROM: G	loria Balta	(Printed on typed)	
40)3 S. Sapodilla #		
W	est Palm Beach	, FL 33401	

NOTE: Please provide the original and one copy of the articles.

City, State & Zip

Daytime Telephone number

msseniornyc@gmail.com
E-mail address: (to be used for future annual report notification)

561-596-5558

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

The name of the corpora	tion shall be: Ms. Senior NY	C, Inc FILED
	NCIPAL OFFICE	15 FEB -9 PH 2:
100 0 0	Principal street address	Mailing address, if different is ARY OF STAT
103 S. Sapo		C/O Balta, FALLAHASSEE, FLORI
<u>Vest Palm l</u>	Beach, FL 33401	403 S. Sapodilla #502
-		West Palm Beach, FL 33401
RTICLE III PUR he purpose for which t	POSE he corporation is organized is:	gage in online retail sales.
		
	•	
		
•		
	•	
ARTICLE IV SHA	MRES 100	
ire irininėt či žirinės či	amor is.	
	TIAL OFFICERS AND/OR DIRECTO	RS
Name and Title	Gloria Balta, Pres.	Name and Title:
Address	403 S. Sapodilla	Address:
Address	#502	Address.
	West Palm Beach, FL 33401	
7.		
Name and Title	:	Name and Title:
Address		Address:
•	•	
c.;		
•		
Name and Title	· · · · · · · · · · · · · · · · · · ·	Name and Title:
Address		Address:

Name	and Title: Name ar	nd Title:
Addre	ess Address	E
I RTICLE VI he <u>name and</u> Name:	Florida street address (P.O. Box NOT acceptable) of the regist Gloria Balta	tered agent is:
Address:	403 S. Sapodilla #502 West Palm Beach, FL 33401	
RTICLE VI	address of the Incorporator is:	
Name:	Gloria Balta	
Address:	403 S. Sapodilla #502 West Palm Beach, FL 33401	
	named as registered agent to accept service of process for the aid. I am familiar with and accept the appointment as registered agent. Required Signature/Registered Agent	
	document and affirm that the facts stated herein are true. I and the Department of State constitutes a third degree felony as provided to the constitutes of the constitutes at the cons	n aware that the false information submitted in
	Required Signature/Incorporator	January 14, 2015 Date
		FILED 15 FEB -9 PH 2: 43 SECRETARY OF STATE TALLAHASSEE, FLORIDA