

P15000033411

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000090183 3)))



H150000901833ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I2000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

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

Email Address: \_\_\_\_\_

FLORIDA PROFIT/NON PROFIT CORPORATION  
IRMAH SCHOOL OF DANCE INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

ymd 4/14

15 APR 13 AM 9:14

15 APR 13 PM 4:23

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

H15000090183

**ARTICLE I NAME:** The name of the corporation is:

Irmah School of Dance Inc

**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

10720 SW 48th Terrace

Miami FL 33165

**ARTICLE III SHARES:** The number of shares of stock is:

100

**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

Irmah Del Valle (P/O)

**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Irmah Del Valle

10720 SW 48 Terr

Miami FL 33105

**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:

Irmah Del Valle

10720 SW 48 Terr.

Miami FL 33105

H15000090183

15 APR 13 AM 9:14

H15000090183

15 APR 13 AM 14

**Required Signatures:**

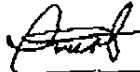
**Having been named as registered agent to accept service of process for the above-stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity**



Registered Agent

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.**



Incorporator

Date

H15000090183