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(Requestor's Name)					
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PICK-UP	☐ WAIT	MAIL			
	usiness Entity Name	<u> </u>			
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(Document Number)					
Certified Copies	_ Certificates o	f Status			
Special Instructions to	Filing Officer:				
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COVER LETTER

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

SUBJECT: Stella C	reations		
	(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	l a check for:
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
FROM: Lu	z Stella Name	e (Printed or typed)	
11 0	Golden Isles Dr Apt F 8		
	-	Address	
Hall	landale Beach Florida 33009		
	City,	State & Zip	
954	-226-7929		
<u>- 4,- , </u>	Daytime T	elephone number	
	1 - etally 2770 valor). COM	

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

E-mail address: (to be used for future annual report notification)

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

RTICLE II PRII XXXXXXX	Principal <u>street</u> address	M	failing address, if different is:	
500 S. F.C.	desal Hwy P.O. BOX P Fl 33008 / 3300	4605		
RTICLE III PUR	,		om silk -artificial flowers e	SECH
			CZ Z	HASSI
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			<u>ග</u> ය	FLORIDA
	AL OFFICERS AND/OR DIRECTORS Lle: LuzStella Odell 11 Golden Isles Dr Apt F 8 Hallandale Beach Florida 33009	Name and Title:Address:	President/Sect/Treasury	
ne number of shares of RTICLE V INIT Name and Ti Address	AL OFFICERS AND/OR DIRECTORS LuzStella Odell 11 Golden Isles Dr Apt F 8	Address:		
ne number of shares of RTICLE V INIT Name and Ti Address	AL OFFICERS AND/OR DIRECTORS LuzStella Odell 11 Golden Isles Dr Apt F 8 Hallandale Beach Florida 33009	Address: Name and Title: Address:		
RTICLE V INIT Name and Ti Address Name and Titl Address	AL OFFICERS AND/OR DIRECTORS LuzStella Odell 11 Golden Isles Dr Apt F 8 Hallandale Beach Florida 33009 e:	Address: Name and Title: Address:		

Name a	nd Title:	Name and Title:
Addres		Address:
•		
	REGISTERED AGENT	No California de La Cal
Name:	Florida street address (P.O. Box NOT acceptable Alexandra Mazuera	e) or the registered agent is:
Address:	12 SW 82nd Ave	
	North Lauderdale 33068	
ARTICLE VII	<u>INCORPORATOR</u>	
The <u>name and a</u>	address of the Incorporator is:	
Name:	LuzStella Odell	
Address:	11 Golden Isles Dr Apt F 8	
	Hallandale Beach Florida 33009	
ARTICLE VIII	EFFECTIVE DATE: -	
Effective date, i (If an effective days after the f		. (OPTIONAL) nnot be more than five business days prior or 90 business
	te inserted in this block does not meet the applica effective date on the Department of State's record	able statutory filing requirements, this date will not be listed as
		cess for the above stated corporation at the place designated registered agent and agree to act in this capacity
x Ju	#	05-15-2015
>:7	Required Signature/Registered Agent	Date
	cument and affirm that the facts stated herein to Department of State constitutes a third degree fe	are true. I am aware that the false information submitted in elony as provided for in s.817.155, F.S.
4	20 6 11/	05-15-2015
Requ	ired Signature/Incorporator	Date



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FLORIDA DEPARTMENT OF STATE LAHASSEE, FLORIDA Division of Corporations

May 28, 2015

LUZ STELLA 11 GOLDEN ISLES DR APR F 8 HALLANDALE BEACH, FL 33009

SUBJECT: STELLA CREATIONS Ref. Number: W15000037776

We have received your document for STELLA CREATIONS and your check(s) totaling \$87.50. 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 effective date is not acceptable since it is not within five working days of the date of receipt.

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.

Christine Haney Regulatory Specialist II New Filing Section

Letter Number: 115A00011240