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ANTA LA RESEE FLORIDA

COVER LETTER

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

SUBJECT: _	Marvelous	Solutions, Inc.		
Sebucer		(PROPOSED CORPORA	TE NAME - MUST INCL	JDE SUFFIX)
Enclosed are as	n original	and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	Fee F	\$78.75 iling Fee c Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
			ADDITIONAL CO	PY REQUIRED
FROM	Oscar I:	Yovany Rosales Name	e (Printed or typed)	
	2123 37	th Ave. E.		
•	 ,		Address	<u></u>
	Bradent	on, FL. 34208		
		City,	State & Zip	
	941-726			
	rosoloos	-	elephone number	
	TOSaleSo	1412@gmail.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)

The name of the corpora		· · · · · · · · · · · · · · · · · · ·	 _
ARTICLE II PRING	CIPAL OFFICE Principal street address	Mailing a	address, if different is:
Bradenton, Fl. 34208			
ARTICLE III PURPO The purpose for which the state of Florida	OSE To cond the corporation is organized is:	uct and transact all busines	ses deemed legal within
			15 SEP
ARTICLE IV SHAR The number of shares of	stock is:		U: 09
Name and Title	Oscar Yovany Rosales/ Owner	Name and Title:	
Address	2123 37th Ave. F	Address:	
	brademon, FL. 34200		
Name and Title	:	Name and Title:	
Address		Address:	
Name and Title	:	Name and Title:	
Address			

Name an	d Title:	Name and Title:	
Address		Address:	
ABMICLE IV			
	REGISTERED AGENT orida street address (P.O. Box NOT accepta	ble) of the registered agent is:	
Name:	DC9 Enterprises, Inc. / P. Daniel Cider	· · · · · · · · · · · · · · · · · · ·	
Address:	3800 26th St. W.		
	Bradenton, FL. 34205		
ARTICLE VII	<u>INCORPORATOR</u>		SSE P
The name and ad	Idress of the Incorporator is:		Sy = F
	Oscar Yovany Rosales		PH 4: 09 SF SINE
Name:	2123 37th Ave. E.		>
Address:	Bradenton, FL. 34208		
Effective date, if	EFFECTIVE DATE: other than the date of filing: ate is listed, the date must be specific and ing.)	. (OPTIONAL cannot be more than five busine) ess days prior or 90 business
	inserted in this block does not meet the appli fective date on the Department of State's rec		s, this date will not be listed as
Having been nan this certificate, I a	ned as registered agent to accept service of p nm familiar with and accept the appointment	rocess for the above stated corpor as registered agent and agree to a	ration at the place designated in act in this capacity
	7003	v v	1-1
	Required S gnature/Registered Ager	t	<u>04/17/15</u> Date
I submit this doci	ument and affirm that the facts stated herei	n are true. I am aware that the f	false information submitted in a
accument to the L	Department of State constitutes a third degree	jeiony as provided for in s.817.1.	55, F.S.
	y		09/17/15
Requir	red Signature/Incorporator		Date