

P15000102245

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

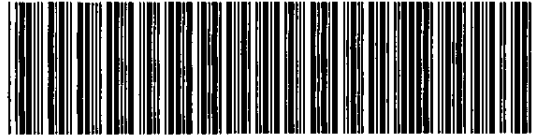
(Document Number)

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2015 DEC 29 PM 4:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

DEC 30 2015

COVER LETTER

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

SUBJECT: Stephanie Moreta, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and 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 COPY REQUIRED

FROM: Stephanie Moreta
Name (Printed or typed)
711N. Pine Island Road, Apt 213
Address
Plantation FL 33324
City, State & Zip
786-257-7944
Daytime Telephone number
stephaniemoreta32@gmail.com
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 9, 2015

STEPHANIE MORETA
711 N PINE ISLAND RD, APT 213
PLANTATION, FL 33324

SUBJECT: STEPHANIE MORETA, INC.
Ref. Number: W15000079345

We have received your document for STEPHANIE MORETA, INC. 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 document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

You must list at least one incorporator with a complete business street address.

Please return 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.

Teresa Brown
Regulatory Specialist II

Letter Number: 015A00025782

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: Stephanie Moreta, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

711 N. Pine Island Road, Apt 213

Plantation FL 33324

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Self-Employment

ANY and ALL Lawful Business

2016 DEC 29 PM 4:05
TALLAHASSEE FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Stephanie Moreta Name and Title: _____

Address 711 N. Pine Island Road Address: _____

Apt 213 _____

Plantation FL 33324 _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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: Stephanie Moreta
Address: 711 N. Pine Island Road, Apt 213
Plantation FL 33324

ARTICLE VII INCORPORATOR

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

Name: Stephanie Moreta
Address: 711 N. Pine Island Road #213
Plantation FL 33324

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Stephanie Moreta
Required Signature/Registered Agent

November 23, 2015
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.

Stephanie Moreta
Required Signature/Incorporator

November 23, 2015
Date