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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

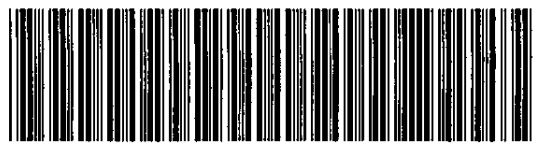
Special Instructions to Filing Officer:

Office Use Only

W/Baw 04214

FEB 22 2016

T. SCOTT



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16 FEB -4 11:47



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 21, 2016

MELISSA WRIGHT SMITH
84 S MADISON DRIVE
PENSACOLA, FL 32505

SUBJECT: MEISHA MEISH
Ref. Number: W16000004248

RECEIVED
16 FEB -4 AM 11:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for MEISHA MEISH and your check(s) totaling \$78.75. 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.

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.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 016A00001394

COVER LETTER

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

SUBJECT: Meisha Meish Pnc,
(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

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Melissa Wright Smith
Name (Printed or typed)
84 s. Madison Drive
Address
Pensacola, Florida 32505
City, State & Zip
850-525-1933
Daytime Telephone number
Iamchosen2014@gmail.com
E-mail address: (to be used for future annual report notification)

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

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: Meisha Meish Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
84 S. Madison Drive
Pensacola, Florida
32505

Mailing address, if different is:

Same as principal

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Musical Entertainment.

Recording music, sale of music + performing of music.
Also all legal and lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Melissa Wright Smith Name and Title: CEO

Address 84 S. Madison Drive Address: _____
Pensacola, Florida _____
32505 _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

16 FEB -4 AM 11:44

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: Melissa Wright Smith
Address: 84 S. Madison Drive
Pensacola, Florida 32505

ARTICLE VII INCORPORATOR

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

Name: Melissa Wright Smith
Address: 84 S. Madison Drive
Pensacola, Florida 32505

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 1-7-16 (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

Melissa Wright Smith
Required Signature/Registered Agent

1-7-16
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.

Melissa Wright Smith
Required Signature/Incorporator

1-7-16
Date