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COVER LETTER

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

Iris - Marie, (PROPOSED CORPORA	TATE NAME - MUST INCLI	JDE SUFFIX)	_
inal and one (1) copy of the ar	ticles of incorporation and	l a check for:	٦
□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	16 APR 19
			AHII: 59
ruthtorrib	le @ hotmail	·com	
	inal and one (1) copy of the ar \$78.75 Filing Fee & Certificate of Status Ruth Torrit Nam 4660 Riba Atlantic Be City 904-3 Daytime ruth+orrib	inal and one (1) copy of the articles of incorporation and \$78.75 Filing Fee & Certificate of Status Ruth Torrible Name (Printed or typed) 4660 Ribault Park ST Address Atlantic Beach, FL 3 City, State & Zip 904-334-9745 Daytime Telephone number ruth torrible @ hot mail	Filing Fee & Certificate of Status Ruth Torrible Name (Printed or typed) Hobo Ribault Park ST Address Atlantic Beach, FL 32233 City, State & Zip

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

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

ne name of the corporate	ion shall be: Iris - Marie	e, In	C .	_
RTICLE II PRINC	FIPAL OFFICE Principal street address	N	failing address, if different is:	
4660 Ri	bault Park ST			
Atlanti	c Beach, FL 32232			
RTICLE III PURPO ne purpose for which t	OSE he corporation is organized is:			
To sta	rt a for prof	it busi		Total
	•		A.	<u> 경</u> 등
				超過 一句記
			<u>D</u>	(2) (1) (1) (1) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
_				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			59	5
Name and Title	David P. Torrible			
Address	4660 Ribault Park ST Atlantic Beach, FL32		4660 Kibault Atlantic Beau	
Name and Title:		Name and Title:		
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.C.). Box NOT acceptable) of the registered agent is:
Name: Ruth Tor	rible
Address: 4660 Riba	ult Park ST
Atlantice	Seach, FL 32233 = =
	6 APR
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator	is:
Name: Ruth To	rrible
Address: 4660 Ri	pault ParkSt 3 3
<u>Atlanti</u>	c Beach, FL 32233
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filin (If an effective date is listed, the date multiple days after the filing.)	ng: (OPTIONAL) st be specific and cannot be more than five business days prior or 90 business
Note: If the date inserted in this block docthe document's effective date on the Depart	es not meet the applicable statutory filing requirements, this date will not be listed as truent of State's records.
	accept service of process for the above stated corporation at the place designated in ept the appointment as registered agent and agree to act in this capacity
x/mi	4-13-2016
Required Signal	rure/Registered Agent Date
	e facts stated herein are true. I am aware that the false information submitted in a titutes a third degree felony as provided for in s.817.155, F.S.
aocument to the Department of State Const	uutes a mara aegree jewny as proviaea jor in 8.017.133, P.S.
Required Signature/Incorporate	4-13-2016 Date
quea DiBliatal a lileta polati	2000