79/6/00/51/77

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nan	ne)		
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			
		į		

Office Use Only



600285685296

06/09/16--01029--004 **87.50

EFFECTIVE DATE 06/02/16

a 06/15/16

COVER LETTER

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

Enclosed are an original and one (1) copy of the articles of incorporation and a check for: S70.00 \$78.75 \$87.50 \$\$87.50 \$\$Iling Fee Filing Fee & Certificate of Status Certificate of Status ADDITIONAL COPY REQUIRED Chanell D. Walker Name (Printed or typed) 1930 Harrison Street, suite. 202 Address Hollywood, Fl 33020 City, State & Zip 321-663-0707 Daytime Telephone number catwalkwalker@hotmail.com	SUBJECT:	Chanel Diana Walker, Inc.				
FROM: Chanell D. Walker Name (Printed or typed) 1930 Harrison Street, suite. 202 Address Hollywood. Fl 33020 City, State & Zip 378.75 Filing Fee Filing Fee, & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED		(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Filing Fee & Certificate of Status Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED Chanell D. Walker Name (Printed or typed) 1930 Harrison Street, suite. 202 Address Hollywood, Fl 33020 City, State & Zip 321-663-0707 Daytime Telephone number	Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation an	d a check for:		
Chanell D. Walker Name (Printed or typed) 1930 Harrison Street, suite. 202 Address Hollywood, Fl 33020 City, State & Zip 321-663-0707 Daytime Telephone number	·	Filing Fee	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status		
Name (Printed or typed) 1930 Harrison Street, suite. 202 Address Hollywood. Fl 33020 City, State & Zip 321-663-0707 Daytime Telephone number			ADDITIONAL CO	OPY REQUIRED		
Name (Printed or typed) 1930 Harrison Street, suite. 202 Address Hollywood, Fl 33020 City, State & Zip 321-663-0707 Daytime Telephone number		Chane	eli D. Walker			
Address Hollywood, Fl 33020 City, State & Zip 321-663-0707 Daytime Telephone number	FROM:					
City, State & Zip 321-663-0707 Daytime Telephone number		1930 Har	rison Street, suite. 202			
City, State & Zip 321-663-0707 Daytime Telephone number		Address				
321-663-0707 Daytime Telephone number	Hollywood, Fl 33020					
Daytime Telephone number		City	, State & Zip			
·						
catwalkwalker@hotmail.com		•				
F-mail address: (to be used for future annual report notification)		catwalkwalker@hotmail.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)

ne name of the cornor	ation shall be:	Chanel Diana Walker, Inc.		
RTICLE II PRIN			Mailing address, if different is:	
30 Harrison Street,	Suite 202	1930 Ha	1930 Harrison Street, suite 202 Hollywood, Fl 33019	
ollywood, Fl 33019		Hollywo		
RTICLE III PURP ne purpose for which	OSE For an the corporation is organized is:	y and all lawful busin	ness.	
ne number of shares o			e: Howard Carter, III - Vice Presiden 1930 Harrison Street, Suite 202 Hollywood, Fl 33020	
Name and Tit	f stock is: AL OFFICERS AND/OR DIRECTORS Chanel D. Walker - President 1930 Harrison street, Suite 202 Hollywood, Fl 33020	Name and Titl Address: Name and Titl Address:	1930 Harrison Street, Suite 202	

Name ar	nd Title:	Name and Title:	
Address	s	Address:	
	REGISTERED AGENT		
	lorida street address (P.O. Box NOT acceptable) Howard Carter, III	of the registered agent is:	
Name:			
Address:	1930 Harrison Street, Suite 202		
	Hollywood, Fl 33020		
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>		
The <u>name and a</u>	ddress of the Incorporator is:		
Name:	Chanell D. Walker	_	
Address:	1930 Harrison street, suite 202		
11441055.	Hollywood, Fl 33020	_	
Effective date, if	EFFECTIVE DATE: 06-02-201 fother than the date of filing:	(OPTIONAL	
	e inserted in this block does not meet the applicab effective date on the Department of State's records		s, this date will not be listed a
Having been na this certificate, I	med as registered agent to accept service of proce am familiar with and accept the appointment as i	ess for the above stated corpo registered agent and agree to	ration at the place designated act in this capacity
	1/2/1/		06-02-2016
	Required Signature/Registered Agent		Date
	cument and affirm that the facts stated herein a Department of State constitutes a third degree fel		
	MIME		06-02-2016
Regu	nired Signature/Incorporator		Date

·

,