

PL 000062248

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

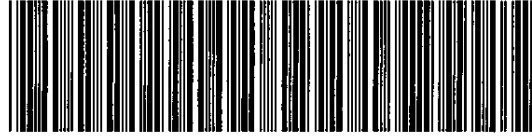
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600286934836

07/20/16--01008--014 **78.75

FILED
2016 JUL 20 AM 8:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Emve Mia, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Camilo Valencia

Name (Printed or typed)

10410 NW 74st Unit 108

Address

Medley, FL. 33178

City, State & Zip

305-206-3500

Daytime Telephone number

camilovalencia08@gmail.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 JUL 20 AM 8:11

FILED

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: Emve Mia, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

10410 NW 74st unit 108, Medley Fl, 33178

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Retail Sale & Wholesale.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Camilo Valencia President

Name and Title:

Address 10410 NW 74st unit 108, Medley, FL

Address:

33178

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

2016 JUL 20 AM 8:11
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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: Camilo Valencia
Address: 10410 NW 74st unit 108, Medley, FL 33178

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 JUL 20 AM 8:11

FILED

ARTICLE VII INCORPORATOR

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

Name: Camilo Valencia
Address: 10410 NW 74st Unit 108, Medley, FL 33178

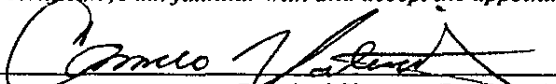
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 07/17/2016 (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

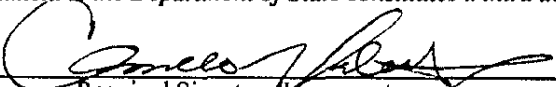


Required Signature/Registered Agent

07/17/2016

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.



Required Signature/Incorporator

07/17/2016

Date