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SEC. OF STATE  
TALLAHASSEE, FLORIDA  
16 SEP 16 AM 1:04

## COVER LETTER

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

SUBJECT: Inside Creative Innovations 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: Filiberto Alicea  
Name (Printed or typed)

94 Harness Ln  
Address

Kissimmee, FL 34743  
City, State & Zip

787-914-0858  
Daytime Telephone number

ICInnovationsFL@gmail.com  
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

**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: Inside Creative Innovations Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

94 Harness Ln

Kissimmee, FL 34743

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Commercial renovation,  
painting and general construction

**ARTICLE IV SHARES**

The number of shares of stock is: 10,000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Filiberto Alicea Name and Title: \_\_\_\_\_

Address 94 Harness Ln Address: \_\_\_\_\_

Kissimmee, FL 34743

President

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

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\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Filiberto Alicea  
Address: 94 Harness Ln  
Kissimmee, FL 34743

**ARTICLE VII INCORPORATOR**

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

Name: Filiberto Alicea  
Address: 94 Harness Ln  
Kissimmee, FL 34743

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TALLAHASSEE, FLORIDA  
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**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: September 12, 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*

[Signature]  
Required Signature/Registered Agent

9/8/16  
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.*

[Signature]  
Required Signature/Incorporator

9/8/16  
Date