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Division of Corporations

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Florida Department of State
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : KIDJENNA SERVICES INC
Account Number : I20080000033
Phone : (305)644-3055
Fax Number : (305)644-3052

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
TWO OUNCES CORP**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
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| Page Count | 01 |
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JUN 22 2017

COVER LETTER

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

SUBJECT: TWO OUNCES CORP
(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: ENNA DIEPPA

Name (Printed or typed)

2141 NW 1st ST SUITE 110

Address

MIAMI, FL 33135

City, State & Zip

917-7904-0005

Daytime Telephone number

GRATEROL.HELEN@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 NAMEThe name of the corporation shall be: TWO OUNCES CORP**ARTICLE II PRINCIPAL OFFICE**Principal street address
41 SE 5TH ST SUITE 2002 MIAMI, FL 33131

Mailing address, if different is:

SAME**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ALL AND ANY LAWFUL PURPOSE**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: HELENA GRATEROL PRESIDENT 60%Address: 41 SE 5TH ST SUITE 2002 MIAMI, FL
33131Name and Title: DIEGO NAVA VP 40%Address: 41 SE 5TH ST SUITE 2002 MIAMI
FL 33131Name and Title: N/A

Address: _____

Name and Title: N/A

Address: _____

Name and Title: N/A

Address: _____

Name and Title: N/A

Address: _____

17 JUN 21 AM 10:27
KIJJOENNA

Name and Title: N/A Name and Title: N/A
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: HELENA GRATEROL
Address: 41 SE 5TH ST SUITE 2002 MIAMI, FL 33131

ARTICLE VII INCORPORATORThe name and address of the incorporator is:

Name: HELENA GRATEROL
Address: 41 SE 5TH ST SUITE 2002 MIAMI, FL
33131

ARTICLE VIII EFFECTIVE DATE:Effective date, if other than the date of filing: 06/21/2017 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

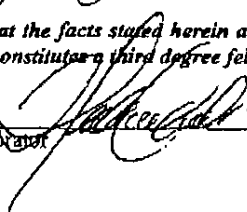
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 Agent06/21/2017_____
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/Incorporator06/21/2017_____
Date