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(Bu	isiness Entity Nar	ne)		
(Document Number)				
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T. SCOTT



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SECRETARY OF STATE TALLAHASSEE, FLORID!

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COVER LETTER

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

SUBJECT:		Thotograph						
	(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 ADDITIONAL CO	& Certificate of Status					
FROM:	FROM: Erick Lamela Name (Printed or typed) 5990 Herons Landing Dr Address Rockledge FL 32955 City, State & Zip 1 954-816-5206 Daytime Telephone number							
<u> </u>								
	eila	mela agr	- ,					
	E-mail address: (to be used for future annual report notification)							

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

PICSHARP PHOTOGRAPHY, INC. 5990 Herons Landing Drive Rockledge FL 32955

April 19, 2018 Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

REF: P16000049226

To Whom it may Concern:

I'm the previous owner of Picsharp Photography, Inc., document#:P16000049226 and I have no intention to reinstate. Please process the current filing forms.

Sincerely,

Erick Lamela President

Articles of Incorporation

(

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

<u>ICLE II PRIN</u>	Principal <u>street</u> address	Mailing address, if different is:	
) HERONS LAN	DING DR		
CKLEDGE, FL. 3	2955		
TICLE III PURI	POSE the corporation is organized is:	GRAPHY SERVICES AND A	NY OTHER BUSINESS
RMITTED BY LA	W.		
	117		
RTICLE IV SHALE of shares of	RES 1000 of stock is:		
e number of shares o	of stock is:		
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Name a	nd Title:	Name and Title:	
Addres	.s	Address:	
	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	ERICK LAMELA	, 0	
Address:	5990 HERONS LANDING DR		
, 140, 233	ROCKLEDGE, FL. 32955		
ARTICLE VII	INCORPORATOR		
The name and a	address of the Incorporator is:		
Name:	ERICK LAMELA		
Address:	5990 HERONS LANDING DR		
	ROCKLEDGE, FL. 32955	_ _	
ARTICLE VIII	EFFECTIVE DATE:		
Effective date, i (If an effective filing.)	f other than the date of filing: date is listed, the date must be specific and car	. (OPTIONAL nnot be more than five days p	.) orior or 90 days after the
Note: If the dat	te inserted in this block does not meet the applica effective date on the Department of State's recor	ble statutory filing requirement ds.	ts, this date will not be listed as
Having been nath	nmed as registered agent to accept service of pro I am familiar yiffy and accept the appointment as	cess for the above stated corpo registered agent and agree to	ration at the place designated in act in this capacity
1	Required Signature/Registered Agent		× 5/1/18
I submit the do	current and affirm that the facto stated herein Department of State conflittues a third degree for	are true. I am aware that the jelony as provided for in \$817.1	false information submitted in a 55, F.S.
χ	HAMMA		× 5/1/18
Requ	uired Signature/Incomporate/		Date