

P18000047231

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
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18 MAY 23 PM 3:16
RECEIVED
DIVISION OF CORPORATIONS
FLORIDA DEPARTMENT OF STATE

**FLORIDA PROFIT/NON PROFIT CORPORATION
MY PAPER PARTY INC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

RECEIVED
2018 MAY 23 PM 4:44
DIVISION OF CORPORATIONS
FLORIDA DEPARTMENT OF STATE

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Corporate Filing Menu

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N. SAMS

MAY 24 2018

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:My Paper Party Inc**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

3923 SW 62nd CT, Miami-FL 33155**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Solange Trinidad Romero. (P)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Solange Trinidad Romero
3923 SW 62nd CT
Miami FL 33155**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Solange Trinidad Romero
3923 SW 62nd CT
Miami FL 33155

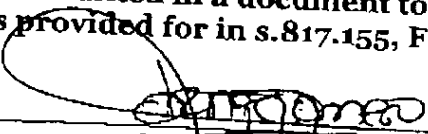
Required Signatures:

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



Registered Agent _____ 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.



Incorporator _____ Date _____

18 MAY 23 PM 3:16
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STATE OF FLORIDA