

P18000052387

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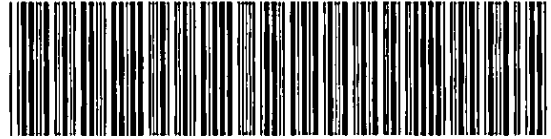
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2018 JUN 11 AM 10:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

KEANDRA HAYES

14773 NE 7th Ave Miami, FL 33161 Tele (305) 785-3780 E-mail: kix305@gmail.com

June 5, 2018

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Florida Department of State:

I will not be re-instating MYLT Corporation with the Document P15000097956. Please find the application and payment for the new filing for MYLT Corporation.

Sincerely,


Keandra Hayes

COVER LETTER

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

SUBJECT: MYLT CORPORATION
(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: KEANDRA HAYES
Name (Printed or typed)

14773 NE 7TH AVE
Address

MIAMI, FL 33161
City, State & Zip

305-785-3780
Daytime Telephone number

KIX305@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 NAME

The name of the corporation shall be: MYLT CORPORATION

ARTICLE II PRINCIPAL OFFICE

Principal street address

14773 NE 7TH AVE

MIAMI, FL 33161

Mailing address, if different is:

14773 NE 7TH AVE

MIAMI, FL 33161

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: KEANDRA HAYES (P)

Address: 14773 NE 7TH AVE

MIAMI, FL 33161

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

2018 JUN 11 AM 12:40
CLERK OF COURT
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: KEANDRA HAYES
Address: 14773 NE 7TH AVE
MIAMI, FL 33161

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: KEANDRA HAYES
Address: 1477 NE 7TH AVE
MIAMI, FL 33161

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 06/01/2018. (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

* Keandra Hayes
Required Signature/Registered Agent

6/5/18
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.

* Keandra Hayes
Required Signature/Incorporator

6/5/18
Date