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

Fax Number : (305)675-5944

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

lleon.	Address:			

FLORIDA PROFIT/NON PROFIT CORPORATION FAIRYTALE EVENTS AND DESIGN INC

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

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:
Fairytale Events AND DESIGN IN
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is:
10760 NW 138 Street
Bay 4 Hilleuh Garden 33018
ARTICLE III SHARES: The number of shares of stock is:
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
CAVIDAD MANTECON (P)
<u> </u>
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is: CARIDAD MANTECON
10760 NW 138 STREET
10 160 NU 130 STREET
BAY & HIAICAH GAEDEN 33018
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is: CARIDAD MANTECOX
BAY 4 HIALEAH GARDEN 33018
DAY Y MIALEMA COMEDER 300

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

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

18 JUL 17 PM 4: 38