

P1800084920

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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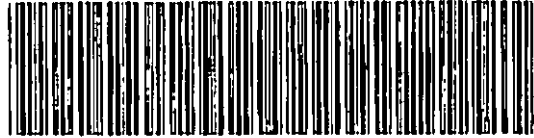
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COVER LETTER

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

SUBJECT: Infinity Designs Enterprise Inc.
(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: Delores Nichilo
Name (Printed or typed)

4087 Meander Pl #202
Address

Rockledge, FL 32955
City, State & Zip

321 432 3331
Daytime Telephone number

infntydesignsforyou@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: Infinity Designs Enterprise Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address

4087 Mcandrew Pl. #202
Rockledge, FL 32955

Mailing address, if different is:

N/A

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Interior Designs Services

ARTICLE IV SHARES

The number of shares of stock is: ~~1000~~ 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Dolores Nichio - (P) Name and Title: _____

Address: 4087 Mcandrew Pl. #202 Address: _____
Rockledge, FL 32955

Name and Title: April Nichio - (VP) Name and Title: _____

Address: 7225 - Hollowell Dr Address: _____
Tampa FL 33634

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: ~~Educator Inc~~ Laura Wilinski, Educator Inc. Private Christian Schol

Address: 400 Barton Blvd #201 (This is not a P.O. Box)
Rockledge, FL 32955 its a physical address
its Laura Wilinski's
business address

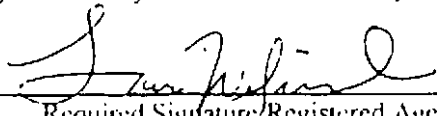
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Dolores S. Nichilo

Address: 4087 Maander, PL
321-432-3331

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 Agent

9-6-2018

Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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/Incorporator

9-6-2018

Date