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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

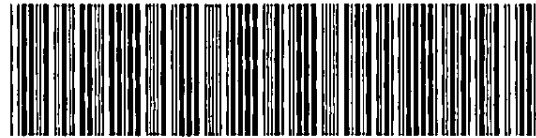
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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AFFIDAVIT

BEFORE ME, the undersigned authority, on this day personally appeared **ASTRID SEGREDO**, who after being firstly duly sworn, under oath, deposes and says:

1. The undersigned is also the sole Director and the President of **MIAMI SCHOOL OF BALLET INC.**, a Florida corporation to be filed with the Florida Department of State on or about **January 14, 2019**.
2. The undersigned hereby consents to and authorizes the use by **MIAMI SCHOOL OF BALLET INC.** of the name **MIAMI SCHOOL OF BALLET INC.**
3. The undersigned has personal knowledge of the fact and matter set forth herein and therefore has no intentions of reinstating the dissolved entity.

FURTHER AFFIANT SAYETH NAUGHT.



ASTRID SEGREDO

STATE OF FLORIDA)
) SS:
COUNTY OF MIAMI-DADE)

PERSONALLY appeared before me, Yelisa D Nunez, who is personally known to me, who being by my first duly sworn, acknowledges that he signed the foregoing for the purposes therein expressed.

Witness my hand and official seal this 14th day of January, 2019





Notary Public Signature

COVER LETTER

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

SUBJECT: MIAMI SCHOOL OF BALLET 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: STEPHANIE MARTINEZ
Name (Printed or typed)

8180 NW 36 ST, SUITE 406
Address

DORAL FL 33166
City, State & Zip

305-406-3800
Daytime Telephone number

ATPLUS@LIVE.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: MIAMI SCHOOL OF BALLET INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

10470 SW 41ST TERR
MIAMI FL 33165

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: ASTRID SEGREDO PRESIDENT

Address: 10470 SW 41ST TERR
MIAMI FL 33165

Name and Title: _____

Address: _____

Name and Title: FABIAN E HERNANDEZ **VP**

Address: 10470 SW 41ST TERRACE
MIAMI FL 33165

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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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: ASTRID SEGREDO
Address: 10470 SW 41ST TERRACE
MIAMI FL. 33165

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: ASTRID SEGREDO
Address: 10470 SW 41ST TERRACE
MIAMI FL 33165

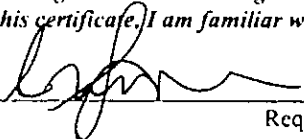
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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.

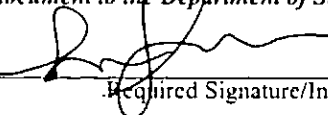
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

1/14/2019
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.



Required Signature/Incorporator

1/14/2019
Date