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To:

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

From:

Account Name : BOOKKEEPING DONE RIGHT INC
Account Number : I20200000064
Phone : (786) 273-7055
Fax Number : (111) 111-1111

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

Email Address: info@bookkeepingdonerightinc.com

FLORIDA PROFIT/NON PROFIT CORPORATION
NM Creation Nails, Inc

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

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Corporate Filing Menu

Help

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

ARTICLE I NAME

The name of the corporation shall be NM Creation Nails Inc

2020 JUL -2 PM 4:54

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is: _____

7935 SW 9 Terrace

Miami, FL 33144

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 Niuris Martinez

Name and Title: _____

Address 7935 SW 9 Terrace

Address: _____

Miami, FL 33144

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: Niuris Martinez
Address: 7935 SW 9 Terr
Miami, FL 33144

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Bookkeeping Done Right Inc
Address: 4700 NW 7th St Suite 10
Miami, FL 33126

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing. 07/02/2020 (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

Niuris Martinez 07/02/2020
Required Signature/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.

Aylen M Armas Ortiz 07/02/2020
Required Signature/Incorporator Date