

20000088198

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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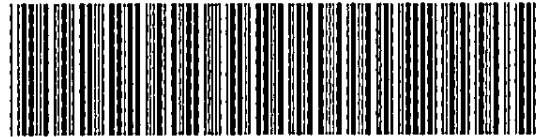
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

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SUBJECT: Decorato Party Supplies 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

78.75 for Both

FROM: Elsie Moreau Pierre
Name (Printed or typed)

4951 S. STATED 7, DAVIE FL 33314
Address

DAVIE FL 33314
City, State & Zip

9545495730
Daytime Telephone number

mjelsie@yahoo.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: DecoRenTo Party Supplies inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address: 4945 S. State Rd 7.

Davie Fl 33314

Mailing address, if different is:

10221 SW 15 St

Pembroke Pines Fl 33025

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Party supplies

ARTICLE IV SHARES

The number of shares of stock is: one (1)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Moreau Pierre: Elsie

DIRECTOR

Address

10221 SW 15 St
Pembroke Pines Fl 33025

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

2020 OCT 20 PM 1:33

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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: ELSIE MOREAU PIERRE
Address: 10221 SW 15th
Pembroke Pines FL 33025

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ELSIE MOREAU PIERRE
Address: 10221 SW 15th
Pembroke Pines FL 33025

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 10/10/2020
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 10/14/2020
Date